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ABSTRACT

This publication offers information by region on state and other repayment, forgiveness, and scholarship programs for medical students. Each section offers fact sheets on the programs offered by the states in one of four regions: central, northeast, southern, and western. The final section contains information on other programs operated by Commissioned Officer Student Training and Extern Program (COSTEP), Indian Health Service, Military Affairs Health Professional Loan Repayment Program (for the National Guard of Delaware), National Health Service Corps, National Institutes of Health Loan Repayment for Auto-Immune Deficiency Syndrome (AIDS) Researchers, Army Medical Department, and the Navy. The fact sheet on each program lists name of program, number of years in existence, source of funds, whom the program targets, service stipulations, key eligibility requirements or restrictions, amount of repayment per year of support, number of recipients per year, number of recipients over the life of the program, special features, whether supplemental materials are on file at the Association of American Medical Colleges, and the name, address, telephone and FAX number of a contact person. (JB)

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STATE AND OTHER LOAN REPAYMENT/FORGIVENESS AND SCHOLARSHIP PROGRAMS

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ASSOCIATION OF
AMERICAN
MEDICAL COLLEGES

STATE AND OTHER LOAN REPAYMENT/FORGIVENESS AND SCHOLARSHIP PROGRAMS



April 1994

**Division of Student Affairs and
Education Services**

Association of American Medical Colleges

State and Other Loan Repayment/Forgiveness and Scholarship Programs

The information contained within this document was compiled by the Section for Student Programs via surveys to: states' health departments and other agencies; medical/health professions schools; federal programs; and military agencies.

For more information or to obtain an additional copy of this handbook, send a written request to:

**Section for Student Programs
Division of Student Affairs and Education Services
Association of American Medical Colleges
2450 N Street, NW
Washington, DC 20037-1126**

**202-828-0681/0680
FAX: 202-828-1125**

***Compiled by:
Donna Quinn Yudkin
Section for Student Programs
Division of Student Affairs & Education Services***

State and Other Loan Repayment/Forgiveness and Scholarship Programs

TABLE OF CONTENTS

	Page
<u>Section I -- Central Region State Programs</u>	
Illinois	1
Indiana	2-3
Iowa	4
Kansas	5-6
Michigan	7
Minnesota	8-14
Missouri	15-16
Nebraska	17-18
North Dakota	19-20
Ohio	21
South Dakota	22-23
Wisconsin	24
<u>Section II -- Northeast Region State Programs</u>	
Connecticut	25
Delaware	26-27
District of Columbia	28
Maine	29
Maryland	30-33
Massachusetts	34-35
New Hampshire	36-37
New Jersey	38
New York	39-40
Pennsylvania	41-42
Rhode Island	43
Vermont	44
<u>Section III -- Southern Region State Programs</u>	
Alabama	45-54
Arkansas	55-56
Florida	57
Georgia	58-59
Kentucky	60-61
Louisiana	62

Table of Contents -- Page Two

Mississippi	63
North Carolina	64-69
Oklahoma	70
Puerto Rico	71
South Carolina -- no information available	
Tennessee	72-73
Texas	74-75
Virginia	76-77
West Virginia	78

Section IV -- Western Region State Programs

Alaska	79
Arizona	80
California	81-82
Colorado	83
Hawaii	84-85
Idaho	86
Montana	87
Nevada	88-89
New Mexico	90-92
Oregon	93
Utah	94-95
Washington	96-97
Wyoming	98

Section V -- Other Programs

COSTEP	99
Indian Health Service	100
Military (Delaware)	101
National Health Service Corps	102-103
NIH Loan Repayment for AIDS Researchers	104
U.S. Army Medical Department	105-116
U.S. Navy	117

SECTION I

CENTRAL

REGION



STATE

PROGRAMS

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LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

ILLINOIS

Name of Program:	Medical Student Scholarship program
Number of years in existence:	Sixteen
Source of funds:	State
Targeted at:	Allopathic and Osteopathic medical students
Service stipulations:	Areas of state needing primary care physicians (FP, IM, Ped, Ob/Gyn); one year of service for one year of support.
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Illinois resident, have financial need, be enrolled in an allopathic or osteopathic medical school in Illinois; committed to primary care
Amount of repayment per year of support:	One year for each year scholarship funds are received; must practice on a full-time basis
Number of recipients per year:	125-135
Number of recipients over the life of the program:	480
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Tom Yocom
Agency name:	Illinois Department of Public Health
Address:	535 W. Jefferson Springfield, IL 62761
Phone:	217-782-1865
FAX:	217-782-2547

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

INDIANA

Name of Program:	Primary Care Scholarship Program (PCSP)
Number of years in existence:	One year
Source of funds:	State
Targeted at:	Medical Students
Service stipulations:	Practice primary care in assigned shortage/underserved areas
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Priority for those who possess characteristics that increase the probability they will practice primary care after they complete medical training.
Amount of repayment per year of service:	1
Number of recipients per year:	20
Number of recipients over the life of the program:	Depends on amount in biennial State budget
Program's unique/special features:	This is the most substantial scholarship program offered by the Indiana University School of Medicine
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	James E. Carter, M.D.
Agency name:	Student and Curricular Affairs
Address:	635 Barnhill Drive, MS16 Indianapolis, IN 46202
Phone:	(317)274-7175
FAX:	(317)274-4309

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

INDIANA

Name of Program:	Nursing Scholarship Fund Program
Number of years in existence:	Three
Source of funds:	State
Targeted at:	Nursing students
Service stipulations:	Practice as nurse in Indiana for at least the first two years following graduation; complete the nursing program within six years of the time the first scholarship is received.
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Indiana resident; must attend an eligible institution at least part-time, demonstrate financial need, have GPA of 2.0 on a 4.0 scale
Amount of repayment per year of service:	
Number of recipients per year:	varies (250-500)
Number of recipients over the life of the program:	750
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Yvonne Heflin
Agency name:	State Student Assistance Commission of IN
Address:	150 N. Market Street-5th Floor Indianapolis, IN 46204-1088
Phone:	317-232-2350
FAX:	317-232-3260

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

IOWA

Name of Program:

Does not have a program; there may be a
program in the near future

Number of years in existence:

Source of funds:

Targeted at:

Service stipulations:

Key eligibility requirements and/or
restrictions:
(not necessarily comprehensive)

Amount of repayment per year of service:

Number of recipients per year:
Number of recipients over the
life of the program:

Program's unique/special features:

Supplemental materials on file at the AAMC:

Contact person(s):

Name, title:

Agency name:

Sharon Cook

Iowa Department of Public Health, Division of
Planning & Administration, Primary Care
Program

Address:

Lucas State Office Building, 4th Floor
Des Moines, Iowa 50319

Phone:

(515) 281-8154

FAX:

(515) 281-5787 (main #)
(515) 281-4958

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

KANSAS

Name of Program:	Primary Care Provider Loan Repayment Program
Number of years in existence:	One
Source of funds:	Federal/National Health Services Corps
Targeted at:	Primary care physicians (GP, FP, IM, PED), physician assistants, nurse practitioners, and third-year residents
Service stipulations:	Minimum contracting period is two years, and maximum is four years
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Must possess a current, unrestricted license to practice in Kansas; priority to those board certified in family practice, osteopathic general practice, obstetrics-gynecology, internal medicine and pediatrics
Amount of repayment per year of service:	\$20,000/year or \$80,000/four years -- physician \$7,000/year or \$28,000/four years -- nurse practitioner/physician assistant
Number of recipients per year:	[1993] six physicians, seven nurse practitioners/physician assistants
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Jane Faubion
Agency name:	Department of Health and Environment, Office of Local and Rural Health Support
Address:	900 SW Jackson, Rm 665 Topeka, KS 66612-1290
Phone:	(913) 296-7439, 296-1200
FAX:	(913) 296-1231

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

KANSAS

Name of Program:	Kansas Medical Student Loan Program
Number of years in existence:	Fourteen
Source of funds:	State
Targeted at:	Medical students in the University of Kansas School of Medicine
Service stipulations:	Obtain M.D., enter and complete primary care residency, license to practice in Kansas, engage in full-time practice (may be postponed for no more than five years for: active military service, VISTA, Peace Corps, Public Health Service, or religious missionary work) in rural counties of Kansas
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Resident of Kansas, attend the University of Kansas Medical School from rural areas of state, have financial need
Amount of repayment per year of service:	Annual tuition plus up to \$1,500/month stipend
Number of recipients per year:	35
Number of recipients over the life of the program:	1,200
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Billie Jo Hamilton, Director of Financial Aid
Agency name:	University of Kansas Medical Center Medical Student Loan Program
Address:	3901 Rainbow Blvd. Kansas City, KS 66160
Phone:	(913) 588-5170
FAX:	(913) 588-4697

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MICHIGAN

Name of Program:	Michigan Loan Repayment Program
Number of years in existence:	Four
Source of funds:	Federal and State
Targeted at:	Primary care physicians (internists, family practitioners, pediatricians, ob/gyn), nurse practitioners, nurse midwives, and physician assistants
Service stipulations:	Select practice site from approved list; work 40 hours/week
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	U.S. citizen; licensed/certified to practice in Michigan
Amount of repayment per year of service:	\$25,000/yr for two years -- physicians \$15,000/yr for two years -- NP, NMW , PA
Number of recipients per year:	1993: 3 physicians, 1 PA, 1 NMW (contingent upon funding)
Number of recipients over the life of the program:	19
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Shirley Harding
Agency name:	Michigan Department of Public Health Division of Managed Care
Address:	3423 N. Logan Lansing, MI 48909
Phone:	(517)335-8925
FAX:	(517)335-8582

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MINNESOTA

This is a reproduction of chart sent out by the Minnesota Office of Rural Health. A Fact Sheet with details follows for each of the six programs.

PROGRAM	ELIGIBLE HEALTH PROFESSIONS	LOCATION OF PRACTICE	APPLICATION PROCESS	AMOUNT OF LOAN REPAYMENT	YEARS TO SERVE	SLOTS AVAILABLE
Federal NHSC	PC Physicians PAs, CNMs, Dentists, Psychiatrists NPs	Federally Designated HPSA, Rural and Urban	Federal NHS Regional Office 800-621-3996	Up to \$35,000 per year	2 year minimum	Varies
MN State Loan Repayment	PC Physicians	Federally Designated HPSA, Urban and Rural	Office of Rural Health (612) 623-5369	Up to \$20,000 per year	2 year minimum	4 Rural/ 1 Urban
Rural Physician Loan Repayment	4th year Medical Students, Peds FP, IM Residents	Rural=Non Metro areas*	Higher Education Coordinating Board 800-657-3866	Up to \$10,000 per year for 4 years	3 of first 5 years	12
Urban Physician Loan Repayment	4th year Medical Students, Peds FP, IM Residents	Metro Under-served to be defined in Rule	Higher Education Coordinating Board 800-657-3866	Up to \$10,000 per year for 4 years	3 of first 5 years	4
Rural MLP Loan Repayment	NPs, PAs, CNMs, Nurse Anesthetist, Adv. Clinical Nurse Spec.	Rural=Non Metro areas*	Higher Education Coordinating Board 800-657-3866	Up to \$3,500 per year for 4 years	2 of first 4 years	8
Nurse Loan Repayment	RNs, LPNs	Nursing Homes, ICF MR	Higher Education Coordinating Board 800-657-3866	Up to \$3,000 per year for 2 years	1 of first 2 years	10

Contact person:

Name, title:

Agency name:

Address:

Phone:

FAX:

Leeann Habte, Research Analyst

Office of Rural Health (ORH)

717 S.E. Delaware Street, P.O. Box 9441

Minneapolis, MN 55440-9441

(612)623-5647, 623-5369 (ORH)

(612)623-5333

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MINNESOTA

Name of Program:	The Nurse Loan Repayment Program
Number of years in existence:	One year
Source of funds:	State
Targeted at:	Persons planning to enroll or have enrolled in program to become a registered nurse or a licensed practical nurse.
Service stipulations:	Must practice in a licensed nursing home or intermediate care facility at least one of the first two years following completion of their nursing education program.
Key eligibility requirements and/or restrictions: (not necessarily a comprehensive listing)	Prospective participant must submit a letter of interest to the HEC Board before completion of nursing education program.
Amount of repayment per year of service:	Up to \$3,000 of qualified loans; for up to two years
Number of recipients per year:	10
Number of recipients over the life of the program:	N/A
Program's unique/special features:	Participants who move from one nursing home to another remain eligible
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Arlon J. Hauptert
Agency name:	Higher Education Coordinating Board
Address:	550 Cedar Street, Suite 400 St. Paul, MN 55101
Phone:	(612) 296-9685
FAX:	(612) 297-8880

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MINNESOTA

Name of Program:	Rural Mid Level Practitioner Loan Repayment Program
Number of years in existence:	One
Source of funds:	State
Targeted at:	Midlevel practitioners (advanced practice nurses, physician assistants)
Service stipulations:	Must serve at least two of the first four years following graduation in a designated rural area.
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Prospective participants must apply prior to or while attending an eligible program
Amount of repayment per year of service:	Up to \$3,500 of qualified loans; for up to four years
Number of recipients per year:	8
Number of recipients over the life of the program:	N/A
Program's unique/special features:	Participants who move practice from one designated rural area to another remain eligible
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Arlon J. Hauptert
Agency name:	Higher Education Coordinating Board
Address:	550 Cedar Street, Suite 400 St. Paul, MN 55101
Phone:	(612) 296-9685
FAX:	(612) 297-8880

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MINNESOTA

Name of Program:	Rural Physician Loan Repayment Program
Number of years in existence:	One
Source of funds:	State
Targeted at:	Medical Students and Residents
Service stipulations:	Must serve at least three of the first five years following completion of residency in a designated rural area
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Be willing to practice in designated rural area; submit a letter of interest
Amount of repayment per year of service:	Up to \$10,000 of qualified loans; for up to four years
Number of recipients per year:	Up to 12 -- four medical students & eight residents
Number of recipients over the life of the program:	N/A
Program's unique/special features:	Participants who move practice from one designated rural area to another remain eligible
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Director of Administrative Services
Agency name:	Higher Education Coordinating Board
Address:	550 Cedar Street, Suite 400 St. Paul, MN 55101
Phone:	(612) 296-9685
FAX:	(612) 297-8880

LOAN REPAYMENT/FORGIVENESS PROGRAMS

FACT SHEET

MINNESOTA

Name of Program:	Urban Physician Loan Repayment Program
Number of years in existence:	One
Source of funds:	State
Targeted at:	Medical students and residents
Service stipulations:	Must serve at least three of the first five years following completion of residency in a designated urban community
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Willing to practice in underserved urban area; submit letter of interest
Amount of repayment per year of service:	Up to \$10,000 of qualified loans, for up to four years following completion of residency
Number of recipients per year:	Four
Number of recipients over the life of the program:	N/A
Program's unique/special features:	Participants who move practice from one designated urban community to another remain eligible
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Director of Administrative Services
Agency name:	Higher Education Coordinating Board
Address:	550 Cedar Street, Suite 400 St. Paul, MN 55101
Phone:	(612) 296-9685
FAX:	(612) 297-8880

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MINNESOTA

Name of Program:	National Health Service Corps Loan Repayment Programs
Number of years in existence:	
Source of funds:	Federal
Targeted at:	Primary Care Physicians, Nurse practitioners, Physician Assistants, Certified Nurse Midwives, Dentists, Psychiatrists
Service stipulations:	Must serve at least two years in a federally designated HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Willing to practice primary care in designated HPSA
Amount of repayment per year of service:	Up to \$35,000
Number of recipients per year: Number of recipients over the life of the program:	
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s): Name, title: Agency name: Address: Phone: FAX:	Office of Rural Health (ORH), Minnesota Department of Health 717 Delaware Street SE Minneapolis, MN 55440-9441 (612) 623-6547

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MINNESOTA

Name of Program:	Minnesota State Loan Repayment Program
Number of years in existence:	
Source of funds:	Federal/State
Targeted at:	Primary Care Physicians
Service stipulations:	Must serve at least two years at an approved site in a HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Willing to practice primary care in designated HPSA
Amount of repayment per year of service:	Up to \$20,000
Number of recipients per year:	9
Number of recipients over the life of the program:	
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	
Agency name:	Office of Rural Health (ORH), Minnesota Department of Health
Address:	717 Delaware Street SE Minneapolis, MN 55440-9441
Phone:	(612) 623-6547
FAX:	

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MISSOURI

Name of Program:	Scholarship Loan Program
Number of years in existence:	Thirteen
Source of funds:	Federal and State
Targeted at:	Medical students
Service stipulations:	Serve in rural area or defined area of need
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Must be a Missouri resident attending a Missouri school; preference given to rural residents
Amount of repayment per year of service:	25% of loan & interest annually
Number of recipients per year:	1
Number of recipients over the life of the program:	100
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Harold Kirbey, George Thomas
Agency name:	Division of Health and Institute Services
Address:	P.O. Box 570 2014 William Street Jefferson City, Missouri 65102
Phone:	(314) 751-6219
FAX:	(314) 751-5350

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MISSOURI

Name of Program:	Loan Repayment Program
Number of years in existence:	Five
Source of funds:	Federal and State
Targeted at:	Primary care physicians
Service stipulations:	Practice in a federally-designated HPSA, in a public or non-profit area
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Missouri resident Licensed, board eligible or certified
Amount of repayment per year of service:	\$20,000
Number of recipients per year:	2-3
Number of recipients over the life of the program:	4
Program's unique/special features:	Allows for forgiveness of debt for service in rural as well as an area of defined need (HPSA)
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Harold Kirbey, George Thomas
Agency name:	Division of Health and Institute Services
Address:	P.O. Box 570 2014 William Street Jefferson City, Missouri 65102
Phone:	(314) 751-6219
FAX:	(314) 751-5350

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEBRASKA

Name of Program:	Nebraska Loan Repayment Program
Number of years in existence:	One
Source of funds:	State and Local Match (50/50)
Targeted at:	Rural physicians and Physician Assistants
Service stipulations:	Two-year practice obligation; may be extended up to four years of loan repayment.
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Nebraska graduate; must be willing to practice primary care in state-designated undeserved area
Amount of repayment per year of service:	\$5,000 (physician assistant); \$10,000 (physician)
Number of recipients per year: Number of recipients over the life of the program:	
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s): Name, title: Agency name:	Kay Pinkley, Senior Health Planner Nebraska Department of Health, Division of Health Policy & Planning, Office of Rural Health
Address:	301 Centennial Mall South P.O. Box 95007 Lincoln, Nebraska 68509-5007
Phone:	(402) 471-2337
FAX:	(402) 471-0383

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEBRASKA

Name of Program:	Nebraska Scholarship Program
Number of years in existence:	Since 1979
Source of funds:	State
Targeted at:	Students (medical and physician assistant)
Service stipulations:	Willing to commit to primary care practice in state underserved area
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Nebraska medical/PA schools only
Amount of repayment per year of service:	Full or partial forgiveness of annual loan
Number of recipients per year:	5
Number of recipients over the life of the program:	113
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Kay Pinkley, Senior Health Planner
Agency name:	Nebraska Department of Health, Division of Health Policy & Planning, Office of Rural Health
Address:	301 Centennial Mall South P.O. Box 95007 Lincoln, Nebraska 68509-5007
Phone:	(402) 471-2337
FAX:	(402) 471-0383

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NORTH DAKOTA

Name of Program:	Physician Loan Repayment Program
Number of years in existence:	Four
Source of funds:	50% State, 50% Local Community
Targeted at:	Physicians (allopathic or osteopathic), general psychiatrists
Service stipulations:	Four-year commitment; serve in HPSA, Psychiatric HPSA, or rural area
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Be from an accredited allopathic or osteopathic medical school in the US or Canada; <i>priority will be given to University of North Dakota School of Medicine graduates, or other graduates who have completed a UND residency training program</i> ; must be licensed to practice in ND
Amount of repayment per year of service:	up to \$10,000 (\$40,00 for four years)
Number of recipients per year:	5
Number of recipients over the life of program:	Depends on legislative appropriations
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Gary Garland
Agency name:	State Department of Health
Address:	600 East Boulevard, Bismarck, ND 58505-0200
Phone:	(701) 224-2894
FAX:	(701) 224-4727
	Mary Amundson, Project Director
	North Dakota Primary Care Cooperative Agreement, UND Center for Rural Health
	P.O. Box 9037, Grand Forks, ND 58203
	(701) 777-3848
	FAX: (701) 777-2389

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NORTH DAKOTA

Name of Program:	Midelevel Practitioner Loan Repayment Program
Number of years in existence:	Beginning in 1994
Source of funds:	50% State, 50% Local Community
Targeted at:	Nurse practitioners, physican assistants, certified nurse midwives
Service stipulations:	Two-year commitment; serve in HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Licensed or registered to practice by appropriate North Dakota regulatory agency. Priority given to people enrolled in or graduated from an accredited ND educational program or to ND residents enrolled in or graduated from an out-of-state educational program
Amount of repayment per year of service:	up to \$5,000 (\$10,00 for two years)
Number of recipients per year:	5
Number of recipients over the life of the program:	Depends on legislative appropriations
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Gary Garland
Agency name:	State Department of Health
Address:	600 East Boulevard, Bismarck, ND 58505-0200
Phone:	(701) 224-2894
FAX:	(701) 224-4727
	Mary Amundson, Project Director
	North Dakota Primary Care Cooperative Agreement, UND Center for Rural Health
	P.O. Box 9037, Grand Forks, ND 58203
	(701)777-3848
	FAX: (701)777-2389

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

OHIO

Name of Program:	Physician Loan Repayment Program
Number of years in existence:	New -- in its first year
Source of funds:	State (surcharge on physician license fees)
Targeted at:	Primary care physicians that will serve in underserved communities
Service stipulations:	Minimum two-year commitment, provide minimum of 40 hours/week; serve in underserved areas
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Limited to Primary Care (FP, GIM, Peds, OB/GYN) within three years of completing residency; background and experiences will be considered
Amount of repayment per year of service:	up to \$20,000//year for up to four years
Number of recipients per year:	12-15
Number of recipients over the life of the program:	75 (approximate -- program will "sunset" in five years)
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Susan Ewing-Ramsay
Agency name:	Office of Primary Care, Ohio Dept. of Health
Address:	P.O. Box 118 Columbus, Ohio 43266-0118
Phone:	(614) 644-8508
FAX:	(614) 644-8526

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

SOUTH DAKOTA

Name of Program:	South Dakota Physician Tuition Reimbursement Program
Number of years in existence:	Six
Source of funds:	State and Local Community
Targeted at:	Family physicians
Service stipulations:	Practice as a family physician in an eligible community (population of 5,000 or less, determined to need and be able to sustain an FP) for at least three years
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Licensed as physician in SD; completed a three-year allopathic residency or two-year osteopathic residency in family practice
Amount of repayment per year of service:	An amount equal to the tuition the qualifying physician would have paid at the university of South Dakota School of Medicine during the time s/he actually attended medical school
Number of recipients per year: Number of recipients over the life of the program:	(no more than) 6 (may participate at one time)
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Bart Hallberg, Community Development Coord.
Agency name:	SD Office of Rural Health, Dept. of Health
Address:	445 East Capitol Avenue Pierre, SD 57501
Phone:	(605)773-3361
FAX:	(605)773-5683

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

SOUTH DAKOTA

Name of Program:	South Dakota Medical Education Scholarship Program
Number of years in existence:	Three
Source of funds:	State
Targeted at:	Medical students at University of South Dakota School of Medicine
Service stipulations:	Enter primary care practice in medically underserved area of SD within a year of completion of graduate medical education; year-for-year obligation
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Interest in primary care, especially family practice; willing to serve in medically underserved area of state; support from one or more communities in an underserved area; acceptance of rural lifestyle and rural practice
Amount of repayment per year of service:	tuition waived for duration of undergraduate medical education
Number of recipients per year: Number of recipients over the life of the program:	6 entering students, 3 third- or fourth-year students
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s): Name, title: Agency name: Address: Phone: FAX:	Becky Craddock DACHC 2501 W. 22nd Street Sioux Falls, SD 57117 (605)339-6541 (605)335-2991

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

WISCONSIN

Name of Program:	Wisconsin Physician Loan Assistance Program
Number of years in existence:	Two
Source of funds:	State
Targeted at:	Primary care physicians
Service stipulations:	Practice in medical shortage areas
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Physicians who are board eligible or board certified in the specialties of FM, GIM or Ped; in some cases -- Ob/Gyn and Psych. can participate in this program
Amount of repayment per year of service:	YEAR 1: 10% of principal or \$5,000 max. YEAR 2: 12.5% of principal or \$6,250 max. YEAR 3: 15% of principal or \$7,500 max. YEAR 4: 20% of principal or \$10,000 max. YEAR 5: 42.5% of principal or \$21,250 max.
Number of recipients per year:	Approximately 15 (varies with loan amount)
Number of recipients over the life of program:	37
Program's unique/special features:	If person leaves area before end of five-year period, Wisconsin assesses no penalties. Beyond first six months, no requirements for repayment.
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	M. Jane Thomas, Manager
Agency name:	Department of Community Development
Address:	123 West Washington Avenue, PO Box 7970 Madison, Wisconsin 53707
Phone:	(608) 267-3837; FAX: (608) 266-8969
	Karen Lunt, Program Development Mgr. Wisconsin Office of Rural Health 740 WARF, 610 Walnut Street Madison, WI 53705; (608)265-3606

SECTION II

NORTHEAST

REGION



STATE

PROGRAMS

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

CONNECTICUT

Name of Program:	Connecticut Loan Repayment Program
Number of years in existence:	Four
Source of funds:	Federal and State
Targeted at:	Primary Care Physicians (Ped, Im, FP, Ob/Gyn, Osteopathic), nurse practitioners, nurse midwives, physician assistants, general dentists
Service stipulations:	Full-time continuous service for up to three years in community health centers in underserved HPSA's serving special populations
Key eligibility requirements and/or (not necessarily comprehensive)	Must be a U.S. citizen; can't have obligation with federal or other state program
Amount of repayment per year of service:	\$20,000 for first year \$25,000 for second year \$30,000 for third year
Number of recipients per year:	14
Number of recipients over the life of the program:	22
Program's unique/special features:	Focuses on community health centers
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Laura Victoria Barrera
Agency name:	Department of Health Services
Address:	150 Washington Street Hartford, Connecticut 06106
Phone:	(203) 566-3287, 566-1143 (Laura)
FAX:	(203) 566-3302
	Joan Dalton
	Department of Public Health and Addiction Services
	same address
	(203)566-1178; FAX: (203)566-8401

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

DELAWARE

Name of Program:	Scholarship Program (with service commitment)
Number of years in existence:	One
Source of funds:	State
Targeted at:	Students
Service stipulations:	Practice primary care in state
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Resident of Delaware willing to practice primary care in the state
Amount of repayment per year of service:	
Number of recipients per year:	Still to be determined
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Peter Chodoff, MD, MPH
Agency name:	Christiana Hospital
Address:	P.O. Box 6001 Newark, DE 19718
Phone:	(302) 733-1042
FAX:	(302) 733-1365

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

DELAWARE

Name of Program:	Scholarship Program (no service)
Number of years in existence:	Twenty
Source of funds:	State
Targeted at:	Students
Service stipulations:	Practice in state
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Resident of Delaware
Amount of repayment per year of service:	
Number of recipients per year:	N/A
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Peter Chodoff, MD, MPH
Agency name:	Christiana Hospital
Address:	P.O. Box 6001 Newark, DE 19718
Phone:	(302) 733-1042
FAX:	(302) 733-1365

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

DISTRICT OF COLUMBIA

Name of Program: Does not have a program; no plans for one in the future

Number of years in existence:

Source of funds:

Targeted at:

Service stipulations:

Key eligibility requirements and/or restrictions:
(not necessarily a comprehensive listing)

Amount of repayment per year of service:

Number of recipients per year:
Number of recipients over the life of the program:

Program's unique/special features:

Supplemental materials on file at the AAMC:

Contact person(s):

Name, title:

Agency name:

Address:

Phone:

FAX:

Mohammad N. Akhter, MD, MPH
Commissioner of Public Health
D.C. Commission of Health
Department of Human Services
1600 L St., NW, Ste. 1200
Washington, DC 20036
(202)673-7700
(202)673-2138

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MAINE

Name of Program:	Loan Repayment Program
Number of years in existence:	Five
Source of funds:	Federal and State
Targeted at:	Family Practice physicians, physician assistants, nurse practitioners, nurse midwives, psychiatrists, dentists
Service stipulations:	Minimum of two years; must be placed in a federally designated HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Must be fully licensed and willing to serve in a shortage area
Amount of repayment per year of service:	\$25,000/physicians; \$20,000/dentists; \$12,500/PA, NP, CNM
Number of recipients per year:	5 or more
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Sophie Glidden, Project Director
Agency name:	Primary Care, Department of Human Services, Station #11
Address:	35 Anthony Avenue Augusta, Maine 04333-0011
Phone:	(207) 624-5424
FAX:	(207) 624-5470

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MARYLAND

Name of Program:	Loan Repayment Program
Number of years in existence:	Three
Source of funds:	Federal and State
Targeted at:	Primary care physician; residents (once they have completed residency training)
Service stipulations:	Practice in shortage area; maximum is two years
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Valid Maryland license; contract with eligible provider located in shortage area; graduated from school within three years; nor previous obligation; and Maryland resident by the time the commitment starts
Amount of repayment per year of service:	\$30,000 maximum for two years
Number of recipients per year:	2
Number of recipients over the life of the program:	5
Program's unique/special features:	Being expanded through influx of State funds, to make 9-12 awards a year.
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Jonathan Foley
Agency name:	Department of Health & Mental Hygiene
Address:	201 W. Preston Street, Room 225 Baltimore, Maryland 21201
Phone:	(410) 225-6811
FAX:	(410) 333-5409

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MARYLAND

Name of Program:	Family Practice Scholarship Program
Number of years in existence:	
Source of funds:	State
Targeted at:	Medical students at the University of Maryland School of Medicine
Service stipulations:	Enter a family practice residency; practice family medicine one year for each year of assistance in a MD area of acute need as determined by the Secretary of Health and Mental Hygiene within six months of completing residency program
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Be admitted to the University of Maryland School of Medicine; demonstrate financial need (file FAFSA); not hold any other state-sponsored assistance
Amount of award per year of service:	\$7,500 per year -- for tuition, fees, and other educational costs (renewable for three years)
Number of recipients per year:	2
Number of recipients over the life of the program:	
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Family Practice Scholarship Program
Agency name:	Maryland Higher Education Commission
Address:	State Scholarship Administration 16 Francis Street Annapolis, Maryland 21401-1781
Phone:	(410)974-5370
FAX:	(410)974-5376

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MARYLAND

Name of Program:	Physical and Occupational Therapists and Assistants Grant Program
Number of years in existence:	
Source of funds:	State
Targeted at:	Physical and occupational therapy students
Service stipulations:	Complete the appropriate program; serve as a therapist/assistant to handicapped children in MD public schools (or under certain limited circumstances, in other shortage areas) within nine months of graduation, one year for each year (or portion) for which an award was made; first year of service must be under full-time on-site supervision of a licensed therapist
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Resident of Maryland; attending eligible Maryland institution full-time; enrolled in professional program leading to licensure in MD as physical therapist, physical therapist assistant, occupational therapist, or occupational therapist assistant assistance; may not hold another state scholarship
Amount of award per year of service:	\$2,000 per year -- for tuition, fees, room, board, or other educational costs (renewable)
Number of recipients per year:	
Number of recipients over the life of program:	
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Physical & Occupational Therapists & Assistants
Agency name:	Maryland Higher Education Commission
	State Scholarship Administration
Address:	16 Francis Street
	Annapolis, Maryland 21401-1781
Phone:	(410)974-5370
FAX:	(410)974-5376

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MARYLAND

Name of Program:	State Nursing Scholarship and Living Expenses Grant
Number of years in existence:	
Source of funds:	State
Targeted at:	Nursing students
Service stipulations:	Serve as a nurse, full-time, at an eligible MD organization within six months of graduation; one year for every year (or portion) for which assistance is received
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Resident of Maryland; attend MD college/program that awards a nursing degree/diploma, at least six credit hours per semester; have GPA of 3.0 (on 4.0 scale); not hold another state scholarship
Amount of award per year of service:	Up to \$1,200/semester & \$2,400/year -- for tuition and fees (renewable up to a maximum of \$9,600); 10% of funds awarded to students seeking second nursing degree [Living Expenses Grant: up to \$1,200/semester & \$2,400/year to scholarship recipients who demonstrate need]
Number of recipients per year:	approximately 300
Number of recipients over the life of program:	
Program's unique/special features:	May fulfill service while enrolled in nursing program as long as conditions are met
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	State Nursing Scholarship
Agency name:	Maryland Higher Education Commission
	State Scholarship Administration
Address:	16 Francis Street
	Annapolis, Maryland 21401-1781
Phone:	(410)974-5370
FAX:	(410)974-5376

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MASSACHUSETTS

Name of Program:	Community Scholarship Program
Number of years in existence:	One (1993)
Source of funds:	Federal, State, and Local Organizations
Targeted at:	Health Professions students
Service stipulations:	Full-time study; two years of service in sponsoring community HPSA after graduation/licensure
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Sponsoring community agencies must contribute 35-40% of scholarship funds; student must be a U.S. citizen
Amount of repayment per year of service:	\$5,000-15,000
Number of recipients per year:	6-8
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	None
Contact person(s):	
Name, title:	Muriel Hodges
Agency name:	Massachusetts Department of Public Health
Address:	150 Tremont Street Boston, MA 02111
Phone:	(617) 727-2662
FAX:	(617) 727-0880

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MASSACHUSETTS

Name of Program:	State Loan Repayment Program
Number of years in existence:	Three (1990)
Source of funds:	Federal and State
Targeted at:	MD's, NP's, CNM's, DO's, DMD's
Service stipulations:	Two years in a HPSA; licensed, primary care health agency
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Must be licensed, certified; no current defaults on loans; willing to serve in a shortage area; must sign contract with state
Amount of repayment per year of service:	\$5,000 - \$15,000
Number of recipients per year:	13-15
Number of recipients over the life of the program:	60
Program's unique/special features:	
Supplemental materials on file at the AAMC:	None
Contact person(s):	
Name, title:	Muriel Hodges
Agency name:	Massachusetts Department of Public Health
Address:	150 Tremont Street Boston, MA 02111
Phone:	(617) 727-2662
FAX:	(617) 727-0880

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEW HAMPSHIRE

Name of Program:	New Hampshire Loan Repayment Program
Number of years in existence:	One
Source of funds:	Federal, State, and local non-profit entities.
Targeted at:	Primary care providers
Service stipulations:	Two-year commitment; HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Must be a primary care provider, hold a New Hampshire license to practice, and be willing to work in a federally-designated HPSA
Amount of repayment per year of service:	\$20,000 (primary care physician) per year, for 2 years; \$10,000 (nurse/physician assistant) per year, for 2 years
Number of recipients per year:	First year: two physicians
Number of recipients over the life of the program:	Second year: three additional physicians and one certified nurse practitioner
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Sue Crawford, Primary Care Coordinator
Agency name:	Division of Public Health Services
Address:	6 Hazen Drive Concord, NH 03301-6527
Phone:	(603) 271-4638
FAX:	(603) 271-3745 [1-800-735-2964]

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEW HAMPSHIRE

Name of Program:	New Hampshire Education Linkages Program
Number of years in existence:	One
Source of funds:	Public Health Service
Targeted at:	Medical students/residents
Service stipulations:	Placed in medically underserved area clinics or practices for a maximum of six weeks.
Key eligibility requirements and/or restrictions: (not necessarily a comprehensive listing)	Student or resident interested in exposure to serving in an underserved area
Amount of repayment per year of service:	
Number of recipients per year:	5
Number of recipients over the life of the program:	15
Program's unique/special features:	Students are reimbursed for food, travel, and lodging expenses during their rotation.
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Sue Crawford, Primary Care Coordinator
Agency name:	Division of Public Health Services
Address :	6 Hazen Drive Concord, NH 03301-6527
Phone :	(603) 271-4638
FAX :	(603) 271-3745
	TDD Access: Relay NH 1-800-735-2964

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEW JERSEY

Name of Program:	Primary Care Physician and Dentist Loan Redemption Program
Number of years in existence:	Two
Source of funds:	State and Federal
Targeted at:	Primary care physicians and dentists
Service stipulations:	Serve in medically underserved areas/health professional shortage areas of the state; full-time, a minumum of two years
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Resident of NJ; satisfactorily completed an accredited residency in (IM, GenPed, FP, Ob/Gyn); licensed to practice in NJ; secured letters of recommendation. [Dentists: completed undergraduate dental training or primary care residency in general Dentistry or Pedodontics]
Amount of repayment per year of service:	Up to \$70,000 of eligible loans/expenses (15% after first year of service, 20% at end of second year, 25% at end of third year, and 40% at end of fourth year)
Number of recipients per year:	N/A
Number of recipients over the life of program:	N/A
Program's unique/special features:	Opportunity to select practice site within a medically underserved area most suitable for the physicians' and dentists' goals
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Sharon W. Bryant, Program Administrator
Agency name:	Primary Care Physician & Dentist Loan Redemption Program
Address:	Administration Complex 119, 30 Bergen Street Newark, NJ 07107-3000
Phone:	(201) 982-4605; FAX: (201) 982-5320

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEW YORK

Name of Program:	Regents Physician Loan Forgiveness Award Program
Number of years in existence:	Eight
Source of funds:	State
Targeted at:	Physicians who complete training in accredited residency program in FP, Ped, IM, or Ob
Service stipulations:	Agree to practice medicine in an area of New York designated as having a shortage of physicians; provide a minimum of 35 hours/week of direct patient care to a designated population; serve twelve months for each annual payment received
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	US citizen, NY resident, license to practice in NY; completed residency within five years immediately preceding first award
Amount of repayment per year of service:	\$10,000 annual maximum payment, up to two years
Number of recipients per year:	80
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Charles Graber
Agency name:	The State Education Department, Bureau of Postsecondary Grants Administration
Address:	Cultural Education Center, Room 5B68 Albany, New York 12230
Phone:	(518) 474-5705
FAX:	

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEW YORK

Name of Program:	Physician Loan Repayment Program
Number of years in existence:	Two
Source of funds:	Federal/State
Targeted at:	Primary care physicians
Service stipulations:	Agree to practice medicine in an area of New York designated by the Board of Regents as having a shortage of physicians
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Licensed in FP, IM, Ped, Ob/Gyn; nominated by an eligible site
Amount of repayment per year of service:	\$15,000 (based on verification of outstanding debt)
Number of recipients per year: Number of recipients over the life of the program:	Approximately 20 new per year; 40 per year
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s): Name, title: Agency name: Address: Phone: FAX:	Ed Brown NY State Department of Health, Bureau of Health Resources Development ESP, Corning Tower, Room 1603 Albany, New York 12237 (518) 474-8340 (518) 473-8434

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

PENNSYLVANIA

Name of Program:	Pennsylvania Primary Health Care Practitioner Loan Repayment Program
Number of years in existence:	One
Source of funds:	Federal and State
Targeted at:	Primary care providers (FP, GIM, DO, GenPed, Ob/Gyn, Dentists, certified registered nurse practitioners, certified nurse midwives, physician assistants)
Service stipulations:	Three-year commitment; be employed continuously in a full-time primary care practice at approved location -- a non-profit community-based or hospital-based primary care center -- in a HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	U.S. citizen; have degree in allopathic or osteopathic medicine OR be a certified/licensed nurse midwife, nurse practitioner, or physician assistant; valid unrestricted PA license/certificate; be enrolled in final year of an approved residency program.
Amount of repayment per year of service:	1st year: 15%, up to \$ 9,600 (physicians)/up to \$6,000 (midlevel) 2nd year: 20%, up to \$12,800/up to \$8,000 3rd year: 30%, up to \$19,200/up to \$12,000 4th year: 35%, up to \$22,400/up to \$14,000
Number of recipients per year: Number of recipients over the life of the program:	40 (20 physicians, 20 midlevel) -- estimate N/A
Program's unique/special features:	Private practice repayment option plan.
Supplemental materials on file at the AAMC:	Yes

continued

Contact person(s):

Name, title:

Agency name:

Address:

Phone:

FAX:

Leslie Best, Recruitment/Retention Coord.

Bur. of Primary Care Resources & Systems Dev

P.O. Box 90, Harrisburg, PA 17108

(717) 772-5298

(717) 783-3794

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

RHODE ISLAND

Name of Program:	Rhode Island Loan Repayment
Number of years in existence:	Starts in summer of '94.
Source of funds:	State, private, and federal
Targeted at:	Physicians, dentists, nurse practitioners, midwives, physician assistants, dental hygienists
Service stipulations:	Two-year commitment; must work for a non-profit entity that accepts all patients, regardless of insurance status.
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Must be eligible health professional; willing to work in area of need in state
Amount of repayment per year of service:	\$10,000-25,000 (estimate)
Number of recipients per year:	10-15
Number of recipients over the life of the program:	unknown
Program's unique/special features:	Dental Hygienists eligible (with non-federal funds)
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Sharon Cagen
Agency name:	Rhode Island Department of Health
Address:	3 Capitol Hill Providence, RI 02908
Phone:	(401) 277-1171
FAX:	(401) 861-5751

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

VERMONT

Name of Program:	Vermont State Loan Repayment Program
Number of years in existence:	One
Source of funds:	Federal, State, local
Targeted at:	Primary care physicians
Service stipulations:	Must serve in a non-profit primary care setting in a federally-designated HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Must present to Health Department a signed contract, private practice agreement, or other proof documenting intention to provide services for one or more years
Amount of repayment per year of service:	Up to \$20,000
Number of recipients per year:	Three (planned)
Number of recipients over the life of the program:	
Program's unique/special features:	Also available for nurse practitioners, physician assistants, and nurse midwives
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Ellen B. Thompson
Agency name:	Department of Health, Health Policy and Planning
Address:	108 Cherry Street P.O. Box 70 Burlington, Vermont 05402
Phone:	(802) 863-7300
FAX:	(802) 863-7425

SECTION III

SOUTHERN

REGION



STATE

PROGRAMS

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

ALABAMA

Name of Program:	Alabama State Loan and Scholarship Program
Number of years in existence:	Nineteen
Source of funds:	State
Targeted at:	Medical students
Service stipulations:	Preference to those willing to practice in a rural area as a generalist; engage in clinical practice for 4, 5, or 6 years in communities of under 50,000 population to get repayment
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	For 20% of student body of each state medical school; 5% who are Alabama residents may receive <i>merit scholarships</i> based solely on basis of scholastic achievement that they are not obligated to repay
Amount of funds per year:	Loan: up to average cost of tuition, fees and living expenses (approximately \$15,000 per year per student). Scholarship: up to \$5,000 per year per student.
Number of recipients per year:	loan--20% of student body of each medical school scholarship--5% of medical students
Number of recipients over the life of program:	
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	W. Charles Graves, Ed.D., Adminstrator, Health Prof. Placement (or Ellen Stone)
Agency name:	Alabama Department of Public Health
Address:	434 Monroes Street Montgomery, AL 36130-3917
Phone:	(800)255-1992 (Ellen: 800-239-6272)
FAX:	(205)240-3374

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

ALABAMA

Name of Program:	NHSC Community Scholarship Program
Number of years in existence:	Three
Source of funds:	Federal (40%), State (15%), and Community (45%)
Targeted at:	Medical students and nurse practitioners from HPSA's
Service stipulations:	Serve minimum of two years in own community after completing a primary care residency
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Be from an HPSA and be willing to return there
Amount of funds per year:	\$10,000 per year (jointly funded)
Number of recipients per year: Number of recipients over the life of program:	6 nurse practitioners, 6 medical students
Program's unique/special features:	Joint effort between state, federal, and local government
Supplemental materials on file at the AAMC:	Yes
Contact person(s): Name, title:	W. Charles Graves, Ed.D., Administrator, Health Prof. Placement (or Cleve Money)
Agency name:	Alabama Department of Public Health
Address:	434 Monroes Street Montgomery, AL 36130-3917
Phone:	(800)255-1992 (Cleve: 205-242-4110)
FAX:	(205)240-3374

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

ALABAMA

Name of Program:	NHSC Loan Repayment Program
Number of years in existence:	Five
Source of funds:	Federal
Targeted at:	Allopathic and Osteopathic physicians (FM, GenPed, GIM, GenPsych, Ob/Gyn), Certified NPs, NMWs, primary care PAs, and Dentists
Service stipulations:	Provide primary care services for a minimum of two years
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	U.S. citizen; valid, unrestricted state license and/or certificate to practice in Alabama
Amount of funds per year:	\$25,000 per year for first two years \$35,000 per year for years 3 and 4
Number of recipients per year: Number of recipients over the life of program:	26 physicians, 6 dentists, 9 midlevels
Program's unique/special features:	Also pays 39% of total qualifies loans to help pay increased taxes due to government's loan repayment
Supplemental materials on file at the AAMC:	Yes
Contact person(s): Name, title:	W. Charles Graves, Ed.D., Administrator, Health Prof. Placement
Agency name:	Alabama Department of Public Health
Address:	434 Monroes Street Montgomery, AL 36130-3917
Phone:	(800)255-1992
FAX:	(205)240-3374

OUTSIDE SOURCES OF SCHOLARSHIPS

FROM:
W. CHARLES GRAVES, Ed.D.
ADM. HEALTH PROF. PLACEMENT
AL DEPT. OF PUBLIC HEALTH

The most frequently asked question in reference to financial assistance concerns the availability of scholarships from sources outside the University and the Financial Aid Office. There are all kinds of scholarship funds from outside sources, however, the trick is being able to tap into them. It takes time and effort to research and seek out the contact person, telephone, or address. The list of names and addresses below was developed by Glenn Middleton, Senior Optometry student, and his wife, Cathy. They gave me the information so that I might pass it on to other health profession students. It took a great deal of work on their part, and my appreciation goes out to them for their consideration in sharing this information with all of you.

There are publications that you can find in your school library on available scholarships for graduate/professional students. Another possible source is a computer network called SOICC. Our Student Development Office here at UAB has this system for the students' use. Basically, it is a computer program that is linked with a national computer bank that houses information on a variety of subjects. One of the files contained in this system is the National Scholarship & Financial Aid File, which contains information on financial aid sources from the Federal Gov't, foundations, businesses, trade & labor organizations, and religious & charitable organizations. You input certain information about yourself, and the computer will produce a printout of possible sources for you to investigate.

All of the organizations listed below have developed scholarships for students in the area of health and medicine. Each comes with its own application process and requirements for eligibility. If interested, I suggest you write to them requesting information on the selection process.

Thanks again to Glenn and Cathy!

1. The Brown Foundation, A Corporation
c/o H. Brown Jr.
43 North Broadway
Sylacauga, AL 35150
(205) 249-0341
2. Central Bank Foundation
Trust Division
P.O. Box 10566
Birmingham, AL 35296
(205) 933-3285
3. Charico Non-Profit Corp.
P.O. Box 1972
Birmingham, AL 35210
4. *Jay Bell*
Mortimer & Josephine Cohen Fund
c/o 1st Ala. Bank of Montgomery
Trust Dept.
P.O. Box 511 - 8 Commerce St
Montgomery, AL 36101
(205) 832-8200

5. Cowin Special Accounts
P.O. Box 175
Birmingham, AL 35201
(205) 841-6666
6. Dumas Charitable Trust
1900 First National-Southern
Natural Building
Birmingham, AL 35203
(205) 252-8800
7. William P. Engel Foundation
300 Bank for Savings Building
Birmingham, AL 35203
(205) 323-8081
8. Fitzpatrick Foundation
P.O. Box 11148
Montgomery, AL 36111
(205) 288-0923
9. J. Hunter Flack Foundation, Inc.
P.O. Box 4479
Montgomery, AL 36101
(205) 265-9531
10. Gartrell Foundation
Star Route
Ashville, AL 35953
(205) 546-0473
11. Avondale Educational & Charitable Foundation, Inc
c/o Avondale Mills
Sylacauga, AL 35150
(205) 245-5221
12. Baldwin County Tuberculosis Asso., Inc.
c/o Charlie A. Bodden
115 West 7th St.
Bay Minette, AL 36507
(205) 937-5141
13. Bankhead Foundation
P.O. Box 2385
Jasper, AL 35501
(205) 221-4044
14. Bedsole Public Welfare Trust
c/o 1st National Bank of Mobile
P.C. Box 1467
Mobile, AL 36621
(205) 438-8332
15. The Blount Foundation, Inc.
4520 Executive Park Drive
Montgomery, AL 36116
(205) 272-8020
16. The Scholarship Foundation, Inc
370 Lexington Ave
New York, NY 10017
(include 1 pg. letter w/stamped
self-addressed envelope)
17. Westend Foundation, Inc.
1100 American Nat'l Bank Bldg.
Chattanooga, TN 37402
(Tennessee residents)
18. Rast Foundation, Inc.
c/o AmSouth Bank, NA
P.O.Box 11426
Birmingham, AL 35202
19. Rothschild Fund
c/o 1st Ala. Bank of Montgomery
P.O Box 511
Montgomery, AL 36134
20. Russell Educational and
Charitable Foundation, Inc
P.O. Box 272
Alexander City, AL 35010
(205) 234-4251
21. L.S. & H.W. Loeb Fund
c/o 1st Ala Bank of Montgomery
P.O. Box 511
Montgomery, AL 36134
(205) 832-8200
22. Luquire Foundation
P.O. Box 2422
Montgomery, AL 36103
(205) 264-7316
23. McWane Foundation
P.O. Box 43327
Birmingham, AL 35243
(205) 969-0710

24. Malbis Memorial Foundation
c/o Antigone Papageorge
P.O. Box 218
Daphne, AL 36526
(205) 626-3050
25. Lena Y. Meharg Scholarship Fund
P.O. Box 2128
Anniston, AL 36201
(205) 236-1890
(sch. for women)
26. Robert R. Meyer Foundation
c/o AmSouth Bank NA
P.O. Box 11426
Birmingham, AL 35202
(205) 326-5120
27. Middleton Theological Endowment Trust
c/o Merchants Nat'l Bank of Mobile
P.O. Drawer 2527
Mobile, AL 36601
(205) 690-1440
28. The Mitchell Foundation, Inc.
2405 1st Nat'l Bank Bldg.
P.O. Box 1126
Mobile, AL 36601
29. Joseph & Rebecca Mitchell Foundation
P.O. Box 160306
Mobile, AL 36616
(205) 476-1200
30. J. George Mitrick Foundation
P.O. Box 1566
Birmingham, AL 35201
(205) 326-0402
31. Nitsos Foundation
502 Dexter Ave.
Mobile, AL 36604
(205) 471-1965
32. O'Neal Foundation, Inc.
P.O. Box 2623
Birmingham, AL 35202
(205) 591-8111
33. Randa, Inc.
c/o 1st Ala Bank of Montgomery
P.O. Box 511
Montgomery, AL 36134
(205) 832-9200
34. Gordy-Mead-Britton Foundation
272 Commerce St., Suite 222
Montgomery, AL 36104-2540
(205) 262-7795
35. Gunter-Dixon Foundation, Inc.
P.O. Box 990
Andalusia, AL 36420
(205) 222-3138
36. John G. Hagan Foundation, Inc.
P.O. Box 947
Montgomery, AL 36102
(205) 365-3311
37. The Harman Foundation
1509 Government St. #404
Mobile, AL 36604
(205) 471-5311
38. Harco Foundation
P.O. Box 2252
Tuscaloosa, AL 35401
(205) 752-1554
39. Henderson Benevolent Trust
c/o AmSouth Bank, NA
Trust Dept.
P.O. Box 11426
Birmingham, AL 35202
(205) 326-5120
40. Hohenberg Foundation, Inc.
c/o E.A. Stewart
101 Church St.
Selma, AL 36701
(205) 326-5120

- 41. Ireland Foundation, Inc.
c/o AmSouth Bank, NA
P.O. Box 11426
Birmingham, AL 35202
(205) 326-5120
- 42. The Johnson Foundation, Inc.
c/o Joel E. Johnson
Geneva, AL 36240
- 43. The Kimerling Foundation, Inc.
2020 Vanderbilt Road
Birmingham, AL 35234
(205) 841-6706
- 44. Harvey King Charitable Trust
P.O. Box 43327
Birmingham, AL 35243
(205) 969-0710
- 45. Joseph N. Langan Charitable Trust
267 Houston St.
Mobile, AL 36606
(205) 478-5103
- 46. James L. & Joan B. Loeb Fund
c/o 1st Ala. Bank of Montgomery
P.O. Box 511
Montgomery, AL 36134
(205) 832-8200

BEST COPY AVAILABLE

E.L. GIBSON FOUNDATION OF ENTERPRISE
TYPE OF AID: SCHOLARSHIP
APPL DEADLINE: NONE

MAJOR ELIGIBILITY:
ONE MUST PROVIDE EVIDENCE OF FINANCIAL NEED. MUST LIVE IN COFFEE, DALE, PIKE,
OR GENEVA COUNTIES. MUST BE IN HEALTH RELATED FIELD.

AID DESCRIPTION:
\$650 IS PROVIDED FOR A YEAR. THE SCHOLARSHIP MAY BE RENEWED IF FUNDS
ARE AVAILABLE.

FOR APPLICATION AND FURTHER INFORMATION:
SUZANNE MONDAY
DIRECTOR OF FINANCIAL AID
GEORGE C. WALLACE STATE COMMUNITY COLLEGE
DOTHAN, AL 36303
TELEPHONE: 983-3521 EXT. 324

042292

593

~~E.L.~~ GIBSON FOUNDATION
TYPE OF AID: SCHOLARSHIP
APPL DEADLINE: APPLICATIONS DUE AUGUST 1; SELECTIONS MADE BY SEPTEMBER 1

MAJOR ELIGIBILITY:
AVAILABLE TO STUDENTS FROM COFFEE COUNTY ENROLLED IN ADVANCED TRAINING,
SHORT COURSES, OR SPECIALIZED TRAINING IN THE HEALTH CAREER FIELDS.

AID DESCRIPTION:
TUITION, BOOKS, AND ROOM AND BOARD ARE PROVIDED.

FOR APPLICATION AND FURTHER INFORMATION:
OFFICE OF FINANCIAL AID
UNIVERSITY OF ALABAMA BIRMINGHAM
UNIVERSITY STATION
BIRMINGHAM, AL 35294
TELEPHONE: 934-8223

042292

600

MATTHEW F. MCNULTY, JR. HEALTH SERVICES LOAN SCHOLARSHIP FUND
TYPE OF AID: SCHOLARSHIP-LOAN
APPL DEADLINE: NONE

MAJOR ELIGIBILITY:
AVAILABLE TO STUDENTS IN NEED OF FINANCIAL ASSISTANCE WHO ARE ENROLLED
IN THE SCHOOL OF COMMUNITY AND ALLIED HEALTH.

AID DESCRIPTION:
THE AMOUNT OF THE AWARD VARIES.

FOR APPLICATION AND FURTHER INFORMATION:
COUNSELOR
SCHOOL OF COMMUNITY AND ALLIED HEALTH
UNIVERSITY OF ALABAMA BIRMINGHAM
UNIVERSITY STATION
BIRMINGHAM, ALABAMA 35294
TELEPHONE: 934-3527

042292

620
HEALTH PROFESSIONS
TYPE OF AID: LOAN
APPL DEADLINE: MARCH 1

MAJOR ELIGIBILITY:
STUDENT MUST COMPLETE PARENTS' CONFIDENTIAL STATEMENT OR FINANCIAL AID FORM AND
MUST DEMONSTRATE NEED.

AID DESCRIPTION:
LOANS EQUALING THE COST OF TUITION PLUS \$2500 PER YEAR MAY BE AWARDED.

FOR APPLICATION AND FURTHER INFORMATION:
FINANCIAL AID OFFICE
SANFORD UNIVERSITY
800 LAKESHORE DR.
BIRMINGHAM, AL 35209

~~100992~~

645
WOMEN'S AUXILIARY TO THE JEFFERSON COUNTY MEDICAL SOCIETY
TYPE OF AID: LOAN
APPL DEADLINE: NONE

MAJOR ELIGIBILITY:
AVAILABLE TO STUDENTS IN SCHOOL OF COMMUNITY AND ALLIED HEALTH AT UAB
INCLUDING THE REGIONAL TECHNICAL INSTITUTE.

AID DESCRIPTION:
THE AMOUNT VARIES.

FOR APPLICATION AND FURTHER INFORMATION:
OFFICE OF FINANCIAL AID
UNIVERSITY OF ALABAMA BIRMINGHAM
UNIVERSITY STATION
BIRMINGHAM, AL 35294
TELEPHONE: 934-8223

042292

673
HEALTH CAREERS
TYPE OF AID: SCHOLARSHIP
APPL DEADLINE: NONE

MAJOR ELIGIBILITY:
MUST BE ACCEPTED BY SCHOOL IN ALLIED HEALTH FIELD. MUST AGREE TO WORK
FOR MEDICAL CENTER HOSPITAL FOR LENGTH OF TIME SCHOLARSHIP WAS PROVIDED
AND FOR PREVAILING WAGE RATE OF SPECIALTY AT GRADUATION.

AID DESCRIPTION:
TUITION, BOOKS, HEALTH AND ACTIVITY FEES ARE PROVIDED. ONE MUST SUBMIT TWO
REFERENCES ALONG WITH A LETTER REQUESTING ASSISTANCE.

FOR APPLICATION AND FURTHER INFORMATION:
SCHOLARSHIP COMMITTEE
MEDICAL CENTER HOSPITAL
1015 MEDICAL CENTER PARKWAY
SELMA, AL 36701

778

THE MARTHA STONE DANIEL HEALTH RELATED ENDOWED SCHOLARSHIP
TYPE OF AID: SCHOLARSHIP
APPL DEADLINE: MARCH 15 FOR PREFERENCE AFTER WHICH AWARDS ARE MADE
BASED ON AVAILABILITY OF FUNDS.

MAJOR ELIGIBILITY:

ONE MUST DEMONSTRATE NEED BY FILING THE FINANCIAL AID FORM AND MUST BE
PLANNING ON A HEALTH RELATED CAREER.

AID DESCRIPTION:

ONE OR MORE SCHOLARSHIPS ARE AWARDED. THE AMOUNT VARIES.

FOR APPLICATION AND FURTHER INFORMATION:

OFFICE OF FINANCIAL AID
P.O. BOX A-16
BIRMINGHAM-SOUTHERN COLLEGE
BIRMINGHAM, AL 35254

090487

911

DR. E. L. GIBSON FOUNDATION SCHOLARSHIP
TYPE OF AID: SCHOLARSHIP
APPL DEADLINE: APRIL 1

MAJOR ELIGIBILITY:

MUST HAVE GRADUATED IN TOP 25% OF HIGH SCHOOL CLASS. PREFERENCE IS
GIVEN TO STUDENT WITH FINANCIAL NEED. ALSO AWARDED IF A 90 OR ABOVE
AVERAGE HAS BEEN MAINTAINED. THE E. L. GIBSON FOUNDATION AWARDS
SCHOLARSHIPS FOR STUDENTS IN HEALTH RELATED FIELD.

AID DESCRIPTION:

THE DR. E. L. GIBSON FOUNDATION SCHOLARSHIP WILL PAY \$200 PER QUARTER
FOR THREE QUARTERS FOR THE RECIPIENT'S TUITION.

FOR APPLICATION AND FURTHER INFORMATION:

HENRY L. QUISENBERRY, JR.
ENTERPRISE STATE JUNIOR COLLEGE
P. O. BOX 1300
ENTERPRISE, ALABAMA 36331
TELEPHONE: 347-2623 EXT. 252

092187

1409

WILLIAM RANDOLPH HEARST ENDOWED BIOPREP SCHOLARSHIP
TYPE OF AID: SCHOLARSHIP
APPL DEADLINE: FEBRUARY 1

MAJOR ELIGIBILITY:

OUTSTANDING STUDENT FROM ONE OF SEVERAL DESIGNATED RURAL HIGH SCHOOLS IN ALABAMA
PARTICIPATING IN THE BIOPREP ACADEMIC HONORS PROGRAM; PURSUING STUDY IN A
PRE-HEALTH PROFESSIONS DISCIPLINE; SELECTION CRITERIA INCLUDE ACADEMIC RECORD,
ENTRANCE EXAM SCORES, AND CHARACTER.

AID DESCRIPTION:

IN-STATE TUITION AND FEES FOR TWO SEMESTERS; RENEWABLE FOR EACH SUCCEEDING YEAR
OF RECIPIENT'S UNDERGRADUATE EDUCATION, IF ACADEMIC PROGRESS MERITS RETENTION.

FOR APPLICATION AND FURTHER INFORMATION:

BIOPREP PROJECT DIRECTOR
BOX 870326
TUSCALOOSA, AL 35487-0326

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

ARKANSAS

Name of Program:	Arkansas Rural Medical Practice Student Loan/Scholarship Program
Number of years in existence:	Forty-four
Source of funds:	State
Targeted at:	Medical students
Service stipulations:	Practice in the rural HPSA's of Arkansas; one year of service for one year of assistance
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Arkansas resident who has been accepted to or enrolled in the University of Arkansas College of Medicine; interviewed by the Arkansas Rural Medical Practice Student Loan and Scholarship Board
Amount of repayment per year of service:	Up to \$12,000
Number of recipients per year:	30-37
Number of recipients over the life of the program:	Over 400
Program's unique/special features:	New legislation offers primary care physicians up to \$12,000 in repayment to accept full-time faculty positions in an Arkansas AHEC or the Department of Family and Community Medicine at UAMS
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Tom G. South
Agency name:	University of Arkansas College of Medicine
Address:	4301 West Markham, SLOT 709 Little Rock, Arkansas 72205
Phone:	(501) 686-5813
FAX:	(501) 686-8160

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

ARKANSAS

Name of Program:	Physician Grant Recruitment and Retention Program
Number of years in existence:	Fifteen
Source of funds:	State
Targeted at:	Physicians
Service stipulations:	Practice Family Medicine in rural community of less than 15,000 population
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Arkansas resident; willing to serve in area of need in state; Family Medicine physicians
Amount of repayment per year of service:	After first year: \$6,000; after second year: \$8,000; after third year: \$10,000; after fourth year: \$12,000; and after fifth year: \$14,000
Number of recipients per year: Number of recipients over the life of the program:	
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s): Name, title: Agency name: Address: Phone: FAX:	Tom G. South University of Arkansas College of Medicine 4301 West Markham, SLOT 709 Little Rock, Arkansas 72205 (501) 686-5813 (501) 686-8160

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

FLORIDA

Name of Program:	Florida Medical Education Reimbursement & Loan Repayment Program
Number of years in existence:	Five
Source of funds:	State and Federal
Targeted at:	Health care practitioners -- physicians, nurses, nurse practitioners, physician assistants
Service stipulations:	Minimum of two-year contract, with one-year renewal option; underserved population in state
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Licensed/certified in Florida; outstanding medical education loans; employment at eligible site in a health professional shortage area
Amount of repayment per year of service:	Physicians: up to \$20,000 (or 1/3 of loan balance); PA's/NP's/CNM's: up to \$10,000 (or 1/3); RN's/LPN's: up to \$4,000 (or 1/3)
Number of recipients per year:	12-17 (depends upon loan balances)
Number of recipients over the life of the program:	
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Karen Granger
Agency name:	HRS Recruitment & Retention (HSAH)
Address:	1317 Winewood Boulevard Tallahassee, FL 32399-07900
Phone:	800-342-8660
FAX:	904-922-6296

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

GEORGIA

Name of Program:	Georgia Scholarship Program
Number of years in existence:	Forty
Source of funds:	State
Targeted at:	Physicians/residents -- FP, GIM, GenPed, Ob/Gyn, GenSurg
Service stipulations:	Primary care in board-approved rural area with population of 15,000 or less
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Georgia resident attending U.S. MD/DO school, have financial need, and willing to serve in rural Georgia community
Amount of repayment per year of service:	Up to \$8,000, renewable
Number of recipients per year:	25-30
Number of recipients over the life of the program:	1,380
Program's unique/special features:	Annual medical fair where participants meet rural town representatives - 259 placed since 1979 with an 84% retention rate
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Joe B. Lawley, Executive Director
Agency name:	State Medical Education Board of Georgia
Address:	244 Washington St., SW, Rm 574J Atlanta, GA 30334
Phone:	(404) 656-2226
FAX:	(404) 651-5788

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

GEORGIA

Name of Program:	The Loan Repayment Program
Number of years in existence:	Four
Source of funds:	Federal, State, and Private Foundation
Targeted at:	Primary care physicians -- M.D., D.O. Midelevels -- NP, PA, CNM
Service stipulations:	Practice full-time in underserved rural area (population of 15,000 or less)/designated HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	MD/DO; licensed in Georgia; must have medical education debt; seeking primary care physicians and midlevel providers, with priority to OB
Amount of repayment per year of service:	\$25,000
Number of recipients per year:	N/A
Number of recipients over the life of the program:	32
Program's unique/special features:	Annual Loan Repayment Seminar to bring target areas and applicants together; visit by AHEC staff to each recipient
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Joe B. Lawley, Exec. Dir.
Agency name:	State Medical Education Board of Georgia
Address:	244 Washington St., SW, Rm 574J Atlanta, GA 30334
Phone:	(404) 656-2226
FAX:	(404) 651-5788

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

KENTUCKY

Name of Program:	Rural Kentucky Medical Scholarship Fund
Number of years in existence:	Forty-eight
Source of funds:	Private Foundation
Targeted at:	Medical students
Service stipulations:	Full-time practice in an approved rural area of state; begin 60 days after completing internship or approved residency; 12 months for each loan received.
Key eligibility requirements and/or restrictions:	Resident of Kentucky, admitted to one of the two accredited medical schools in Kentucky, willing to practice in rural area in Kentucky, need financial help, willing to practice primary care -- FP, IM, Ob/Gyn, and Ped
Amount of repayment per year of service:	Loan may be forgiven for each year of practice in a critical county, up to \$10,000 or repayment of loan year-for-year at a low interest rate
Number of recipients per year:	approximately 25
Number of recipients over the life of the program:	550
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Vicki Yates
Agency name:	Kentucky Medical Association
Address:	301 N. Hurstbourne Pkwy, Suite. 200
Phone:	(502) 426-6200
FAX:	(502) 426-6877

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

KENTUCKY

Name of Program:	Establish Practice Grant Program (EPGP)
Number of years in existence:	Four
Source of funds:	Private Foundation
Targeted at:	Primary Care Physicians
Service stipulations:	Full-time practice in an approved critical county in state; 12 months for each award received
Key eligibility requirements and/or restrictions:	Resident of Kentucky, committed to primary care -- FP, IM, Ob/Gyn, and Ped; have educational debt
Amount of award per year of service:	\$10,000 up to \$40,000 or four years
Number of recipients per year:	5
Number of recipients over the life of the program:	7
Program's unique/special features:	Helps to defray physician's educational debt
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Vicki Yates
Agency name:	Kentucky Medical Association
Address:	301 N. Hurstbourne Parkway, Ste. 200
Phone:	(502) 426-6200
FAX:	(502) 426-6877

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

LOUISIANA

Name of Program:	State Loan Repayment Program for Physicians, Dentists, and Midlevels
Number of years in existence:	Three
Source of funds:	Federal and State
Targeted at:	Primary care practitioners -- FP, GP, IM, Ob/Gyn, Dentistry, Ped, and Psych, Nurse Practitioner, Physician Assistant, Nurse Midwife
Service stipulations:	Practice full-time in HPSA at a public/non-profit entity; minimum commitment of two years, not more than three
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Graduate of an approved U.S. Medical school and licensed to practice in Louisiana
Amount of repayment per year of service:	Physicians: for two years, up to \$26,666 for three years, up to \$60,000 Midlevels: for two years, up to \$6,666 for three years, up to \$15,000
Number of recipients per year:	year 1: 14; year 2: 7; and year 3: 10
Number of recipients over the life of the program:	31
Program's unique/special features:	Allows 20% of loan payments to be put into an escrow account to defray tax liability
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Beth Millet, Program Coordinator
Agency name:	DHH/Bureau of Health Resource Management
Address:	P.O. Box 1349 Baton Rouge, LA 70821-1349
Phone:	(504) 342-4702
FAX:	(504) 342-5839

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MISSISSIPPI

Name of Program:	State Medical Education Loan/Scholarship Program
Number of years in existence:	Two
Source of funds:	State and Private
Targeted at:	Medical students
Service stipulations:	Practice primary care in underserved area
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	A current legal Mississippi resident; accepted for enrollment in the University of Mississippi School of Medicine, need financial assistance; GPA is a factor; willing to commit to primary care; and must not be defaulted on any educational loans
Amount of repayment per year of service:	up to \$6,000 (up to \$24,000 over four years)
Number of recipients per year:	20-30
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Dottie C. Strain
Agency name:	Institutions of Higher Learning
Address:	3825 Ridgewood Road Jackson, Mississippi 39211-6453
Phone:	(601) 982-6578
FAX:	(601) 982-6527

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NORTH CAROLINA

Name of Program:	Student Loan Program for Health, Science and Mathematics (HSM)
Number of years in existence:	Forty-six
Source of funds:	State
Targeted at:	Students
Service stipulations:	Full-time employment in approved designated health shortage area, state facility, educational system, or veterinary sciences discipline
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Legal NC resident; enrolled full-time in an approved field of study, have financial need
Amount of repayment per year of service:	AA/Certificate -- \$2,500/year (up to 2 years) BS/Certificate -- \$4,00/year (up to 3 years) MS -- \$5,000/year (up to 2 years) Health Professional/Doctoral -- \$7,500/year (up to 4 years) Aggregate: \$38,000 (maximum per student)
Number of recipients per year:	Varies per year
Number of recipients over the life of the program:	1,111 [\$7,160,974] -- over past nine years
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Edna Wallace, Manager
Agency name:	N.C. State Educational Assistance Authority
Address:	3824 Barrett Drive, Suite 304 P.O. Box 20549 Raleigh, NC 27619-0549
Phone:	(919) 571-4182
FAX:	(919) 571-4181

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NORTH CAROLINA

Name of Program:	Loan Repayment Program
Number of years in existence:	Five
Source of funds:	[A] State [B] Federal
Targeted at:	Primary care providers
Service stipulations:	Two-four years in designated community-based practice in medically underserved area (primary care HPSA)
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	[A] Legal US citizen; primary care physician: FP, Ob, CNMW, PA, NP [B] Primary care physician: FM, GenPed, GIM, Ob/Gyn, Pcnp, CNMW, PA
Amount of repayment per year of service:	[A] Up to \$100,000 for Ob (4-year commitment) Up to \$70,000 for Non-Ob physician (4 years) Up to \$40,000 for CNMW (3-year commitment) Up to \$30,000 for PA/FNP (3 years) [B] Up to \$50,000 for two-year commitment Up to \$85,000 for three years Up to \$120,000 for four years
Number of recipients per year:	[A] 15 [B] 6
Number of recipients over the life of the program:	[A] 44 [B] 24
Program's unique/special features:	Add a 39% tax stipend to offset increased tax liability. Can be combined with "High Needs Service Bonus" Program
Supplemental materials on file at the AAMC:	Yes

continued

Contact person(s):

Name, title:

Agency name:

Address:

Phone:

FAX:

[A]

Joe Robbins

N.C. Office of Rural Health and Resources
Development

311 Ashe Avenue

Raleigh, NC 27606

(919) 733-2040, 800-533-8847

(919) 733-8300

[B]

NHSC Loan Repayment

8201 Greensboro Drive, Suite 600

McLean, VA 22102

800-221-9393

(VA) 703-734-6855

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NORTH CAROLINA

Name of Program:	High Needs Service Bonus Program
Number of years in existence:	Three
Source of funds:	State
Targeted at:	Primary care physicians
Service stipulations:	Two-four years in designated community-based practice in medically underserved area (primary care HPSA)
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	US citizen; persons with low or no loans; primary care physicians: FP, Ob, CNMW, PA, NP
Amount of repayment per year of service:	Up to \$50,000 for Ob (4-year commitment) Up to \$35,000 for Non-Ob physician (4 years) Up to \$20,000 for CNMW (3-year commitment) Up to \$15,000 for PA/FNP (3 years)
Number of recipients per year:	4
Number of recipients over the life of the program:	11
Program's unique/special features:	Can be packaged with state and federal loan repayment programs
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Joe Robbins
Agency name:	N.C. Office of Rural Health and Resources Development
Address:	311 Ashe Avenue Raleigh, NC 27606
Phone:	(919) 733-2040, 800-533-8847
FAX:	(919) 733-8300

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NORTH CAROLINA

Name of Program:	Stipend Program for Primary Care Residents
Number of years in existence:	One
Source of funds:	State
Targeted at:	Physicians in primary care residencies
Service stipulations:	Practice in a primary care HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	NC resident; IM, Ped, FP, Ob
Amount of repayment per year of service:	\$10,000 over resident salary
Number of recipients per year:	15
Number of recipients over the life of the program:	15
Program's unique/special features:	Supplements resident's salary
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Joe Robbins
Agency name:	N.C. Office of Rural Health and Resources Development
Address:	311 Ashe Avenue Raleigh, NC 27606
Phone:	(919) 733-2040, 800-533-8847
FAX:	(919) 733-8300

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NORTH CAROLINA

Name of Program:	Scholarship Program
Number of years in existence:	[A] In first year [B] Over 15
Source of funds:	[A] State [B] Federal
Targeted at:	Medical Students
Service stipulations:	Serve in designated shortage areas/practices
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	[A] NC resident [B] federal criteria
Amount of repayment per year of service:	
Number of recipients per year:	[A] N/A [B] 4
Number of recipients over the life of the program:	[A] 10 [B] over 200
Program's unique/special features:	Stipend to N.C. medical students
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Nan Rideout
Agency name:	N.C. Office of Rural Health and Resources Development
Address:	311 Ashe Avenue Raleigh, NC 27606
Phone:	(919) 733-2040, 800-533-8847
FAX:	(919) 733-8300

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

OKLAHOMA

Name of Program:	Rural Medical Education Scholarship Loan Program
Number of years in existence:	Eighteen
Source of funds:	State
Targeted at:	Students enrolled in an allopathic or osteopathic medical school
Service stipulations:	One year of primary care practice in a rural Oklahoma community with less than 7,500 population for each year of the scholarship/loan (must practice at least two years for any credit to be given)
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Oklahoma resident willing to practice in rural area of state; no other conflicting service obligation; currently enrolled in (or accepted into) a medical college
Amount of repayment per year of service:	\$6,000 in first year; \$12,000 each for second, third, and fourth years
Number of recipients per year:	15-20
Number of recipients over the life of the program:	267
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Rick Ernest, Executive Director
Agency name:	Physician Manpower Training Commission
Address:	1140 N.W. 63rd Street, Suite 302 Oklahoma City, OK 73116
Phone:	(405) 843-5667
FAX:	(405) 843-5792

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

PUERTO RICO

Name of Program:	Scholarship Program
Number of years in existence:	Since 1948
Source of funds:	State
Targeted at:	Students
Service stipulations:	For every year of scholarship, must serve government one year; according to the assigned salary and site
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Exceptional financial need; with satisfactory academic progress
Amount of scholarship:	
Number of recipients per year:	depends on number of qualified applicants
Number of recipients over the life of the program:	
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Secretary of the Health of Puerto Rico
Agency name:	PR Department of Health
Address:	Call Box 70184 San Juan, PR 00936
Phone:	(809)250-1458
FAX:	(809)250-6547

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

TENNESSEE

Name of Program:	Health Access Incentive Program -- Loan Repayment for Physicians
Number of years in existence:	Four
Source of funds:	Unclaimed property
Targeted at:	Primary care physicians -- FP, Ob, Ped, IM
Service stipulations:	Minimum of a two and a half-year commitment; set up practice to serve all populations in a designated HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	U.S. citizen; board eligible/certified
Amount of repayment per year of service:	Up to \$50,000 (2.5 years)
Number of recipients per year:	20-25
Number of recipients over the life of the program:	87
Program's unique/special features:	Also available: up to \$25,000 for solo practitioners; Extended Term Incentive; Locum Tenens; practice subsidy, professional liability insurance assistance
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Gary Williams
Agency name:	Division of Health Access
Address:	536 Cordell Hull Building Nashville, TN 37247-5410
Phone:	(615) 741-7308, 800-659-3010
FAX:	(615) 741-1063

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

TENNESSEE

Name of Program:	Health Access Incentive Program -- Loan Repayment for Midlevels
Number of years in existence:	Four
Source of funds:	Unclaimed property
Targeted at:	Nurse Practitioners, nurse midwives, physician assistants
Service stipulations:	serve at an approved site in a shortage area; must have a preceptor
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	U.S. citizen; board certified; TN license
Amount of repayment per year of service:	Up to \$25,000
Number of recipients per year:	
Number of recipients over the life of the program:	13
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Gary Williams
Agency name:	Division of Health Access
Address:	536 Cordell Hull Building Nashville, TN 37247-5410
Phone:	(615) 741-7308, 800-659-3010
FAX:	(615) 741-1063

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

TEXAS

Name of Program:	Physician Education Loan Repayment Program of Texas
Number of years in existence:	First repayments awarded in 1987; inclusion of Texas Family Practice Residency Training participants in 1994
Source of funds:	State (matching federal funds available)
Targeted at:	Physicians
Service stipulations:	Practice with one of four state agencies or in a rural or economically depressed community that is medically underserved; or be enrolled in second- or third-year Texas Family Practice Residency Training Program
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Texas license; priority to those who have completed an approved residency program [FP, Osteo, Ob/Gyn, GIM, Gen Ped, Psych, Emergency Care, GenSurg]; or be enrolled in second- or third-year Texas Family Practice Residency Training Program
Amount of repayment per year of service:	Up to \$9,000 (for maximum of five years or \$45,000). Practice in area of <u>highest</u> need and qualify for additional federal funds of \$9,000 per year -- <i>for a total of up to \$18,000/year for a maximum of five years or \$90,000</i>
Number of recipients per year:	65-70 physicians; 55 residents
Number of recipients over the life of the program:	230
Program's unique/special features:	Matching federal funds
Supplemental materials on file at the AAMC:	Yes

continued

Contact person(s):

Name, title:

Agency name:

Address:

Phone:

FAX:

**Mack C. Adams, Assistant Commissioner
Division of Student Services, Texas Higher
Education Coordinating Board
P.O. Box 12788, Austin, TX 78711
(512)462-6325
(512)483-6420**

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

VIRGINIA

Name of Program:	Loan Repayment Program
Number of years in existence:	One
Source of funds:	Federal and State
Targeted at:	Primary care physicians
Service stipulations:	Two-year commitment in a designated medically underserved area/HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Graduate and complete residency in FP, Ped, Ob/Gyn or IM
Amount of repayment per year of service:	\$20,000 [two-year minimum]
Number of recipients per year:	5
Number of recipients over the life of the program:	0
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Beverly Stone
Agency name:	
Address:	
Phone:	(804) 786-6970
FAX:	(804) 371-0116

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

VIRGINIA

Name of Program:	Scholarship Program (with service commitment)
Number of years in existence:	Forty-five
Source of funds:	State
Targeted at:	Students
Service stipulations:	Sign contract to practice in Virginia designated medically underserved area
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Must graduate and complete residency in Family, Pediatrics and OB/GYN or IM.
Amount of repayment per year of service:	\$10,000
Number of recipients per year:	40
Number of recipients over the life of the program:	72
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Beverly Stone
Agency name:	
Address:	
Phone:	(804) 786-6970
FAX:	(804) 371-0116

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

WEST VIRGINIA

Name of Program:	West Virginia Community Scholarship Program
Number of years in existence:	Two
Source of funds:	Federal (40%), State (20%), Community (40%)
Targeted at:	Medical, Nurse Practitioner, Nurse Midwife, and PA students
Service stipulations:	Minimum two-year commitment or one year for every year of support received (whichever is greater) in a health profession shortage area of state
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	West Virginia resident living in HPSA committed to general practice -- FP, Ob/Gyn, GIM, or Ped; must demonstrate strong ties to the community
Amount of repayment per year of service:	N/A
Number of recipients per year:	10 (approximate)
Number of recipients over the life of the program:	11
Program's unique/special features:	Scholarship money can only be used to cover tuition and other educational expenses, plus reasonable living expenses; 40% of scholarship money must be raised by community of the student's residence
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Jodie Jackson, MPH
Agency name:	WV University, Office of Rural Health
Address:	P.O. Box 9003 Health Sciences North Morgantown, WV 26506-9003
Phone:	(304) 293-6753
FAX:	(304) 293-3005

SECTION IV

WESTERN

REGION



STATE

PROGRAMS

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

ALASKA

Name of Program:	WICHE/WAMI Medical Exchange Programs
Number of years in existence:	Thirty-eight
Source of funds:	State
Targeted at:	Students
Service stipulations:	None at this time
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Must be a resident of Alaska
Amount of repayment per year of service:	N/A
Number of recipients per year:	12-20
Number of recipients over the life of the program:	Variable
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Diane Barrans, Program Coordinator
Agency name:	
Address:	3030 Vintage Blvd. Juneau, Alaska 99801-7109
Phone:	(907) 465-6743
FAX:	(907) 465-3293

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

ARIZONA

Name of Program:	Arizona Medical Student Loan Program
Number of years in existence:	Fourteen
Source of funds:	State
Targeted at:	Students
Service stipulations:	Minimum two-year service commitment in medically underserved area in state
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Attend University of Arizona; state resident; willing to practice FP, IM, Ped, Ob
Amount of repayment per year of service:	Up to \$16,580 (depends on obligation)
Number of recipients per year:	7-13 (1992: 8)
Number of recipients over the life of the program:	91
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Maggie Gumble
Agency name:	College of Medicine Financial Aid
Address:	University of Arizona 1501 N. Campbell Tucson, Arizona 85724
Phone:	(602) 626-7145
FAX:	(602) 626-4884

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

CALIFORNIA

Name of Program:	NHSC/CA State Loan Repayment Program
Number of years in existence:	Two
Source of funds:	Federal and Non-profit entity
Targeted at:	Primary care physicians, nurse practitioners, physician assistants, and nurse midwives -- FP, GP, GIM, GenPed, and Ob/Gyn
Service stipulations:	Enter into a contract to provide direct patient care in a certified eligible site in a designated HPSA full-time for at least two consecutive years
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Valid California license; identify a practice opportunity in a certified eligible site; provide information on outstanding educational debt
Amount of repayment per year of service:	up to \$25,000 (two-year commitment); up to \$35,000/year for a third- and/or fourth-year commitment
Number of recipients per year:	25 (average)
Number of recipients over the life of the program:	52
Program's unique/special features:	Candidate identifies a practice opportunity in a certified site
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Delia R. Santiago, Program Manager or Helen M. Lowry
Agency name:	Office of Statewide Health Planning and Development
Address:	1600 9th Street, Room 440 Sacramento, CA 95814
Phone:	(916) 654-1833 or 654-2087
FAX:	(916) 654-3138

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

CALIFORNIA

Name of Program:	Primary Care Health Professional Loan Repayment Program
Number of years in existence:	N/A
Source of funds:	State
Targeted at:	Primary care physicians, nurse practitioners, physician assistants, and nurse midwives -- FP, GP, GIM, GenPed, Ob/Gyn
Service stipulations:	Two-year commitment; enter into a contract to provide full-time direct patient care in a certified eligible site in a designated HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Valid California license; identify a practice opportunity in a certified eligible site; provide information on outstanding educational debt
Amount of repayment per year of service:	Up to \$12,500 (two-year commitment); \$17,500 for a third- and/or fourth-year commitment
Number of recipients per year:	N/A
Number of recipients over the life of the program:	N/A
Program's unique/special features:	Candidate identifies a practice opportunity in a certified site
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Delia R. Santiago, Program Manager or Helen M. Lowry
Agency name:	Office of Statewide HealthPlanning and Development
Address:	1600 9th Street Room 440 Sacramento, CA 95814
Phone:	(916) 654-1833 or 654-2087
FAX:	(916) 654-3138

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

COLORADO

Name of Program:	Colorado Health Professional Loan Repayment Program
Number of years in existence:	Three
Source of funds:	Federal and Community
Targeted at:	Primary care providers in stipulated disciplines
Service stipulations:	Minimum two years service in a federally designated HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	willing to practice in stipulated discipline and designated HPSA
Amount of repayment per year of service:	Years 1 & 2: \$20,000/yr; Year 3: \$35,000; any combination to maximum per person of \$70,000
Number of recipients per year:	6-10
Number of recipients over the life of the program:	16
Program's unique/special features:	Matches federal dollars with community dollars from assigning agency/employer
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	T.R. Kavtsky
Agency name:	Colorado AHEC System, Loan Repayment Project
Address:	UCHSC, Box A-096 4200 E. Ninth Avenue Denver, CO 80262
Phone:	(303)270-5885
FAX:	(303)270-5886

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

HAWAII

Name of Program:	Native Hawaiian Health Scholarship Program
Number of years in existence:	Three
Source of funds:	Federal
Targeted at:	Native Hawaiian/Part Hawaiian students pursuing a career in the health field
Service stipulations:	Serve in a federally designated in the state of HI
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Must be native Hawaiian/Part Hawaiian; U.S. citizen; enrolled in an accredited health professions training program
Amount of repayment per year of service:	N/A
Number of recipients per year:	average of 10 students
Number of recipients over the life of the program:	average of 110 students
Program's unique/special features:	For specific population of health professionals
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	L. Sita Nissanka, Dr.PH, Director
Agency name:	Native Hawaiian Health Scholarship Program
Address:	1850 Makuakane Street, Building E Honolulu, HI 96817-1830
Phone:	(808)842-8562
FAX:	(808)842-8540

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

HAWAII

Name of Program:	NHSC
Number of years in existence:	N/A
Source of funds:	Federal/NHSC
Targeted at:	Family Practice physicians, midwives, PA's, and Nurse Practitioners
Service stipulations:	HPSA/NHSC loan repayment sites
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Same as federal criteria; willing to commit to service
Amount of repayment per year of service:	N/A
Number of recipients per year:	N/A
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Barbara Pierson
Agency name:	Dept. of Health, FHSD
Address:	3652 Kilauea Avenue Honolulu, HI 96813
Phone:	(808)733-9017
FAX:	(808)733-8369

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

IDAHO

Name of Program:	Idaho Health Professional Loan Repayment Program
Number of years in existence:	Two
Source of funds:	State
Targeted at:	Primary care health providers
Service stipulations:	Two- to four-year contract to provide medical assistance to underserved area
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Willing to serve as nurse practitioner; physician assistant, physician -- FP, GP, IM, Ob, Ped
Amount of repayment per year of service:	25% (up to \$20,000)
Number of recipients per year:	9 (approximate)
Number of recipients over the life of the program:	dependent upon funding
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Jeffrey A. Bartlome, Ph.D., Director
Agency name:	Institute of Rural Health Studies
Address:	Idaho State University Campus Box 8174 Pocatello, ID 83209-8174
Phone:	(208) 236-4436, 800-876-4781
FAX:	(208) 236-4645

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MONTANA

Name of Program:	Montana Rural Physician Incentive Program
Number of years in existence:	Two
Source of funds:	State, plus trust fund from fees to students receiving allopathic/osteopathic education by WAMI and WICHE programs
Targeted at:	Primary care physicians
Service stipulations:	Serve in medically underserved area
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	U.S. citizen; eligible for Montana license; M.D./D.O. degree. Preference to former WAMI students from Montana
Amount of repayment per year of service:	\$3,000 after six months; \$3,000 after 12; \$3,500 after 18 and 24; \$4,000 after 30 and 36; and \$4,500 after 42 and 48 months -- up to \$30,000 over a four-year period
Number of recipients per year:	N/A
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	David Toppen, Ph.D.
Agency name:	Office of the Commissioner of Higher Education
Address:	2500 Broadway, P.O. Box 203101 Helena, MT 59620-3101
Phone:	(406)444-6570
FAX:	(406)444-0684

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEVADA

Name of Program:	Nevada Community Scholarship Program
Number of years in existence:	Three
Source of funds:	Federal, State, and Local (Community)
Targeted at:	students
Service stipulations:	Two-year obligation; serve in rural or medically underserved area of Nevada
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	willing to serve in rural or medically underserved area in state
Amount of repayment per year of service:	
Number of recipients per year:	3
Number of recipients over the life of the program:	9
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Caroline Ford
Agency name:	University of Nevada, Reno
Address:	Mail Stop 150 Reno, NV 89557
Phone:	(702)784-4841
FAX:	(702)784-4544

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEVADA

Name of Program:	Nevada Loan Repayment Program
Number of years in existence:	Three
Source of funds:	Federal, State, and Local (Community)
Targeted at:	Physicians
Service stipulations:	Two-year obligation; serve in rural or medically underserved area of Nevada
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	willing to serve in rural or medically underserved area in state; licensure in NV
Amount of repayment per year of service:	
Number of recipients per year:	1-2
Number of recipients over the life of the program:	6
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Caroline Ford
Agency name:	University of Nevada, Reno
Address:	Mail Stop 150 Reno, NV 89557
Phone:	(702)784-4841
FAX:	(702)784-4544

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEW MEXICO

Name of Program:	New Mexico Medical Education Loan Repayment Program
Number of years in existence:	Six
Source of funds:	Federal/NHSC
Targeted at:	Primary care providers -- MD, DO, FNP, CNMW, PA
Service stipulations:	Commit to two-year term; must be employed continuously in a full-time practice; underserved area
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Appropriately license or certified
Amount of repayment per year of service:	Rural physician: up to \$10,000 + tax payment Urban physician: up to \$5,000 + tax payment Rural midlevel: up to \$5,000 Urban midlevel: up to \$2,500
Number of recipients per year:	17 (approximate)
Number of recipients over the life of the program:	103
Program's unique/special features:	Special consideration given to practices with exceptional demands (hard-to-fill, after-hours every other night, and heavy obstetric responsibilities)
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Kim Kinsey, Planner
Agency name:	NM Dept. of Health, Primary Care Section
Address:	P.O. Box 26110 Santa Fe, NM 87502
Phone:	(505) 827-2527
FAX:	(505) 827-2329

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEW MEXICO

Name of Program:	Osteopathic Medical Student Loan for Service Program
Number of years in existence:	Fourteen
Source of funds:	State
Targeted at:	Osteopathic medical students
Service stipulations:	Practice in medically underserved rural areas in New Mexico
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	A citizen of US; resident of New Mexico; enrolled in accredited Osteopathic medicine program; complete Need Analysis form
Amount of repayment per year of service:	40% in first year; 30% in second and third years
Number of recipients per year:	6 (approximate)
Number of recipients over the life of the program:	61 (approximate)
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Kenn D. Williams Program Representative
Agency name:	NM Educational Assistance Foundation 3900 Osuna Road, NE P.O. Box 27020
Address:	Albuquerque, NM 87125-7025
Phone:	(505) 345-3371, Ext. 315
FAX:	(505) 345-6381

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

NEW MEXICO

Name of Program:	NM Physician and Physician Assistant Student Loan for Service Program
Number of years in existence:	Thirteen
Source of funds:	State
Targeted at:	Medical students, physician assistant students
Service stipulations:	Practice in medically underserved rural areas in New Mexico
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	A citizen of US; resident of New Mexico; enrolled in accredited school of medicine or physician assistant school; complete Need Analysis form
Amount of repayment per year of service:	40% in first year; 30% in second and third years
Number of recipients per year:	10 (approximate)
Number of recipients over the life of the program:	120 (approximate)
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Kenn D. Williams Program Representative
Agency name:	NM Educational Assistance Foundation 3900 Osuna Road, NE P.O. Box 27020
Address:	Albuquerque, NM 87125-7025
Phone:	(505) 345-3371, Ext. 315
FAX:	(505) 345-6381

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

OREGON

Name of Program:	Oregon Rural Health Services (RHS) Program
Number of years in existence:	Two
Source of funds:	State
Targeted at:	Physicians, nurse practitioners, and physician assistants
Service stipulations:	Practice in medically underserved rural areas in state; Physicians: in the five years following agreement, must practice for at least three years in qualifying area; NP/PA's: in the four years following agreement, must practice for at least two years
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Submit a letter of interest and application; must be enrolled in educational program leading to the appropriate professional certification
Amount of repayment per year of service:	Physicians: 20% of qualifying loan principal (up to five years) Nurses/PA's: 25% (up to five years)
Number of recipients per year:	10 physicians, 10 nurse practitioners, 10 physician assistants
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Tom Turner
Agency name:	State Scholarship Commission
Address:	1500 Valley River Drive, Suite 100 Eugene, OR 97401 (503) 687-7407
Phone:	
FAX:	

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

UTAH

Name of Program:	Rural Medical Scholarship Program
Number of years in existence:	Two
Source of funds:	State
Targeted at:	Osteopathic and Allopathic medical students
Service stipulations:	Full-time clinical practice at a site in medically underserved rural Utah. The minimum service obligation is two years
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	US citizen; enrolled or accepted in U.S. school of allopathic (M.D.) or osteopathic (D.O.) medicine; complete an accredited training program in FP, GenPed, GIM, Ob/Gyn
Amount of repayment per year of service:	\$12,00 per year, up to four years
Number of recipients per year:	As many as are qualified
Number of recipients over the life of the program:	7
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Bob Quinn
Agency name:	Utah Department of Health
Address:	288 N. 1460 W. P.O. Box 16990 Salt Lake City, Utah 84116-0990
Phone:	(801) 538-6113
FAX:	(801) 538-6387

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

UTAH

Name of Program:	Rural Medical Education Loan Repayment Program
Number of years in existence:	Three
Source of funds:	Federal and State
Targeted at:	Physicians, physician assistants
Service stipulations:	Commitment of two years in a rural medically underserved area/HPSA; be available to begin medical practice within one year of application
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Strong commitment to rural health care; graduate from an allopathic or osteopathic medical school that awards M.D./D.O. degree; complete accredited post-graduate training program in US or Canada; and have not practiced medicine in rural Utah within three years prior to application.
Amount of repayment per year of service:	Up to \$73,200 over four years
Number of recipients per year:	As many as are qualified.
Number of recipients over the life of the program:	17
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Bob Quinn
Agency name:	Utah Department of Health
Address:	288 N. 1460 W. P.O. Box 16990 Salt Lake City, Utah 84116-0990
Phone:	(801) 538-6113
FAX:	(801) 538-6387

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

WASHINGTON

Name of Program:	State Loan Repayment Program
Number of years in existence:	Four
Source of funds:	State
Targeted at:	Primary care providers
Service stipulations:	Serve in medically underserved/shortage areas of the state; minimum commitment of three years.
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Match with facility designated as a priority site; committed to primary care
Amount of repayment per year of service:	Up to \$25,000 (based on debt burden)
Number of recipients per year:	8
Number of recipients over the life of the program:	22
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Kathy McVay
Agency name:	Washington State Higher Education Coordinating Board
Address:	917 Lakeridge Way P.O. Box 43430 Olympia, Washington 98504-3430
Phone:	(206) 753-5902
FAX:	(206) 753-1784

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

WASHINGTON

Name of Program:	State Scholarship Program
Number of years in existence:	N/A
Source of funds:	State
Targeted at:	students (health professional)
Service stipulations:	Practice in designated shortage/undeserved area of the state for minimum of three years
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Accepted into health professions program that leads to licensure in the state
Amount of scholarship:	Based on annual review of educational expenses
Number of recipients per year:	68 (this year)
Number of recipients over the life of the program:	200 (approximate)
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Kathy McVay
Agency name:	Washington State Higher Education Coordinating Board
Address:	917 Lakeridge Way P.O. Box 43430 Olympia, Washington 98504-3430
Phone:	(206) 753-5902
FAX:	(206) 753-1784

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

WYOMING

Name of Program:	State Loan Repayment Grant (NHSC)
Number of years in existence:	N/A
Source of funds:	Federal/NHSC and State
Targeted at:	Primary care providers
Service stipulations:	Practice in medically underserved area of the state
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Similar to federal/NHSC criteria
Amount of repayment per year of service:	Up to \$30,000 for physicians Up to \$10,000 for mid-level providers
Number of recipients per year:	Two physicians; three mid-level providers
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	No
Contact person(s):	
Name, title:	Doug Thiede
Agency name:	Department of Health
Address:	117 Hathaway Building Cheyenne, Wyoming 82002
Phone:	(307) 777-7656
FAX:	(307) 777-7439

SECTION V

OTHER:

Federal & Military



PROGRAMS

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

COSTEP

Name of Program:	Commissioned Officer Student Training and Extern Program (COSTEP)
Number of years in existence:	
Source of funds:	Federal
Targeted at:	Students in medicine, nursing, pharmacy, and other health professions
Service stipulations:	Work in one of eight PHS agencies or federal program staffed by PHS health professionals
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Complete at least a year of study in medical, dental, or veterinary school or at least two years in an accredited baccalaureate program in an approved discipline or be enrolled in a master's/doctoral program in a health-related field; U.S. citizen; free from other obligations; meet standards of PHS Commission Corps
Amount of repayment per year of service:	N/A
Number of recipients per year:	N/A
Number of recipients over life of the program:	N/A
Program's unique/special features:	Applicants may state geographic/program preferences; reimbursed for travel to/from their assignment; earn 2.5 days of annual leave time for each month of service; dependents are provided some benefits/privileges during their period of active duty
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Susan Corle
Agency name:	COSTEP, PHS Recruitment
Address:	8201 Greensboro Drive, Suite 600 McLean, Virginia 22102
Phone:	(800)221-9393, [VA](703) 734-6855
FAX:	(703)821-2098

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

INDIAN HEALTH SERVICE

Name of Program:	Indian Health Service Loan Repayment
Number of years in existence:	Six
Source of funds:	Federal
Targeted at:	Physicians and nurses
Service stipulations:	Nurse: two years (may be extended) Physician: two years (may be extended)
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	U.S. citizen, have completed residency training; licensed; certified or eligible to sit for exams in primary care and certain specialties
Amount of repayment per year of service:	Up to \$30,000 (depends on site)
Number of recipients per year:	200
Number of recipients over the life of the program:	840
Program's unique/special features:	Pays additional 32% annually to the IRS to offset the increased tax liability incurred by the participant
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	
Agency name:	IHS Loan Repayment Program
Address:	12300 Twinbrook Parkway, Suite 100 Rockville, Maryland 20852
Phone:	(301)443-3396
FAX:	(301)443-6048

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

MILITARY--DELAWARE

Name of Program:	Military Affairs Health Professionals Loan Repayment Program
Number of years in existence:	
Source of funds:	State
Targeted at:	Physicians and nurses
Service stipulations:	Perform as officer in Army National Guard
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Commissioned officer in Army National Guard; valid license; in good standing; qualified in a designated specialty area
Amount of repayment per year of service:	Up to \$3,000 (maximum of \$20,000)
Number of recipients per year:	N/A
Number of recipients over the life of the program:	N/A
Program's unique/special features:	
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, Title:	Major Mike Mansfield
Agency name:	Delaware Army National Guard
Address:	116th Mobil Army Surgical Hospital 1420 Newport Gap Pike Wilmington, DE 19804-2848
Phone:	(302)324-7080
FAX:	(302)324-7029

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

National Health Services Corps

Name of Program:	NHSC Loan Repayment Program
Number of years in existence:	Four
Source of funds:	Federal
Targeted at:	Physicians, CNP, CNMW, PA, Dentists
Service stipulations:	Four-yr commitment in high priority underserved areas nationwide; most are rural
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	U.S. citizen, must be licensed and have completed residency training.
Amount of repayment per year of service:	Up to \$25,000/year for two-year commitment Up to \$35,000/year for years 3 & 4
Number of recipients per year:	N/A
Number of recipients over the life of the program:	N/A
Program's unique/special features:	Will pay 39% of increased federal, state, and local income taxes
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	
Agency name:	Division of Health Services Scholarships Loan Repayment Program
Address:	Parklawn Building, Room 7-18 5600 Fishers Lane Rockville, MD 20857
Phone:	(301)443-1650; (800)221-9393
FAX:	(301)443-8338

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

National Health Service Corps

Name of Program:	NHSC Scholarship Program
Number of years in existence:	Three
Source of funds:	Federal and Private Foundation
Targeted at:	Medical, osteopathic, dental, nursing, and physician assistant students
Service stipulations:	Commitment of minimum of two years in a federally-designated HPSA
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	U.S. citizen enrolled or accepted in US school of allopathic (MD) or osteopathic (DO) medicine, dentistry, advanced nursing, or primary care physician assistant; preference to those with goal of primary care and to prior recipients of EFN scholarship
Amount of repayment per year of service:	
Number of recipients per year:	N/A
Number of recipients over the life of the program:	N/A
Program's unique/special features:	Payment of tuition and required fees and 12 monthly stipends of \$736 -- up to four years
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	
Agency name:	Division of Health Services Scholarships
Address:	Parklawn Building, Room 7-18 5600 Fishers Lane Rockville, MD 20857
Phone:	(301) 443-1650
FAX:	(301) 443-8338

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

National Institutes of Health

Name of Program:	Loan Repayment Program for AIDS Research
Number of years in existence:	Five
Source of funds:	Federal
Targeted at:	Physicians, Scientists, and Nurses engaged in qualified AIDS research
Service stipulations:	Sign contract to engage in AIDS research as employee of NIH for two years
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	US citizen or permanent resident; have Ph.D., M.D., D.O., D.D.S., D.M.D., D.V.M., or R.N.; have qualifying debt in excess of 20% of annual NIH salary
Amount of repayment per year of service:	Up to \$20,000
Number of recipients per year:	approximately 20
Number of recipients over the life of the program:	approximately 100
Program's unique/special features:	Focus on recruiting HIV/AIDS researchers
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Marc S. Horowitz, J.D., Director Loan Repayment Program for AIDS Research National Institutes of Health
Agency name:	
Address:	7550 Wisconsin Ave., Federal Bldg., Room 102 Bethesda, MD 20892-9905
Phone:	(800)528-7689
FAX:	(301)480-5481

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

U.S. ARMY MEDICAL DEPARTMENT (AMD)

Name of Program:	Financial Assistance Program for Resident Physicians/Dentists
Number of years in existence:	
Source of funds:	Federal
Targeted at:	Medical residents and dentists
Service stipulations:	Minimum of two years of active Federal service
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	U.S. citizen; resident in fully-accredited specialty training program at post-graduate Level I or above; in good standing; eligible for appointment as commissioned officer in AMD; free from all other obligations
Amount of repayment per year of service:	A total of over \$25,000 (\$16,177 annual, \$762 monthly stipend, reimbursement of approved educational expenses)
Number of recipients per year:	N/A
Number of recipients over the life of the program:	N/A
Program's unique/special features:	Supplements resident's salary
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Name, title:	Major Fred D. Mack
Agency name:	Army Medical Department
Address:	3101 Maguire Boulevard, Suite 166 Orlando, Florida 32803-3720 (407) 896-0780
Phone:	
FAX:	
Write to:	HQDA, Attn: SGPS-PDE 5111 Leesburg Pike Falls Church, VA 22041-3258

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

U.S. ARMY MEDICAL DEPARTMENT (AMD)

Name of Program:	Advanced Education Program in General Dentistry
Number of years in existence:	Since 1947
Source of funds:	Federal
Targeted at:	Senior Dental students
Service stipulations:	Three-year commitment
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Between the ages of 21 and 32 upon entry; US citizen; enrolled in senior year at accredited school of dentistry in US, DC, or Puerto Rico; meet prescribed medical standards; high moral character
Amount of repayment per year of service:	N/A
Number of recipients per year:	24
Number of recipients over the life of the program:	N/A
Program's unique/special features:	one year general residency
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Agency name:	NE: AMEDD Regional Office
Address:	#3 Wembley Square, Suite 103 New Karner Road Albany, New York 12205 (518) 452-5872
Phone:	
	West: AMEDD Regional Office Box 327 Fitzsimons Army Medical Center Aurora, Co 80045-5001 (303) 361-3208

continued

SE: AMEDD Regional Office
Building 710, Ft Gillem
Forest Park Georgia 30050-5000
(404) 362-3138

Cent: AMEDD Regional Office
Rockland Plaza, Suite 21-G3
Lake Bluff, IL 60044-9998
(708) 295-9140

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

U.S. ARMY MEDICAL DEPARTMENT

Name of Program:	Advanced Educational Program in General Medicine
Number of years in existence:	Three
Source of funds:	Federal
Targeted at:	Medical students
Service stipulations:	Forty-five day active training for duty; then serve in Army's first year graduate medical education program/residency; then active duty obligation
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	US citizen; enrolled in/letter of acceptance from an accredited school or of medicine or osteopathy in the US/Puerto Rico; meet prescribed eligibility criteria for appointment as a commissioned officer
Amount of repayment per year of service:	N/A
Number of recipients per year:	N/A
Number of recipients over the life of the program:	N/A
Program's unique/special features:	Tuition and expenses, plus stipend for 10 1/2 months and pay & allowances for 1 1/2 months
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Agency name:	NE: AMEDD Regional Office
Address:	#3 Wembley Square, Suite 103 New Karner Road Albany, New York 12205 (518) 452-5872
Phone:	West: AMEDD Regional Office Box 327, Fitzsimons Army Medical Center Aurora, Co 80045-5001 (303) 361-3208

**SE: AMEDD Regional Office
Building 710, Ft Gillem
Forest Park Georgia 30050-5000
(404) 362-3138**

**Cent: AMEDD Regional Office
Rockland Plaza, Suite 21-G3
Lake Bluff, IL 60044-9998
(708) 295-9140**

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

U.S. ARMY MEDICAL DEPARTMENT

Name of Program:	Health Professionals Loan Repayment (HPLR) Program
Number of years in existence:	Nine
Source of funds:	Federal
Targeted at:	Board-eligible physicians and nurses in selected specialties
Service stipulations:	Participation in selected reserve
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Board-eligible; meet requirements for a U.S. Army Commission
Amount of repayment per year of service:	N/A
Number of recipients per year: Number of recipients over the life of the program:	50
Program's unique/special features:	Yearly stipend goes directly to lending institution
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Agency name:	Northeast AMEDD Regional Office
Address:	Attn: SGPS-PDO-RA Box 98 Fort Devens, MA 01433 (508)796-6140
Phone:	
	Western AMEDD Regional Office Attn: SGPS-PDO-RE 1111 Bayhill Drive, Suite 205 San Bruno, CA 94066 (415)794-2050

Southeast AMEDD Regional Office
Attn: SGPS-PDO-RB
Building 710, 1st floor
Fort Gillem, GA 30050
(404) 362-3377

Central AMEDD Regional Office
Attn: SGPS-PDO-RC
100 N. Waukegan Road, S-100
Lake Bluff, IL 60044
(708) 295-9741

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

U.S. ARMY MEDICAL DEPARTMENT

Name of Program:	New Specialized Training Assistance Program (STRAP)
Number of years in existence:	Eight
Source of funds:	Federal
Targeted at:	Surgical residents and nursing students in selected specialties
Service stipulations:	Two-year USAR obligation for every year stipend received
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Be enrolled in approved program at post-graduate level leading to board eligibility in any surgical specialty: meet requirements for U.S. Army Commission
Amount of repayment per year of service:	N/A
Number of recipients per year: Number of recipients over the life of the program:	250
Program's unique/special features:	No military training required while in residency
Supplemental materials on file at the AAMC:	Yes
Contact person(s): Agency name: Address: Phone:	Northeast AMEDD Regional Office Attn: SGPS-PDO-RA Box 98 Fort Devens, MA 01433 (508)796-6140 Western AMEDD Regional Office Attn: SGPS-PDO-RE 1111 Bayhill Drive, Suite 205 San Bruno, CA 94066 (415)794-2050

**Southeast AMEDD Regional Office
Attn: SGPS-PDO-RB
Building 710, 1st floor
Fort Gillem, GA 30050
(404) 362-3377**

**Central AMEDD Regional Office
Attn: SGPS-PDO-RC
100 N. Waukegan Road, S-100
Lake Bluff, IL 60044
(708) 295-9741**

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

U.S. ARMY MEDICAL DEPARTMENT

Name of Program:	Army Nurse Candicacy Program (ANCP)
Number of years in existence:	Two
Source of funds:	Federal
Targeted at:	Nursing students in third or fourth year of BSN Completion Program
Service stipulations:	Two-year program = five-year active duty obligation; one-year program = four-year active duty obligation
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Meet requirements for U.S. Army; maintain 3.0 GPA
Amount of repayment per year of service:	N/A
Number of recipients per year: Number of recipients over the life of the program:	50
Program's unique/special features:	Commissioned 2LT upon degree completion
Supplemental materials on file at the AAMC:	Yes
Contact person(s): Agency name:	Local U.S. Army Recruiter at the nearest U.S. Army Recruiting Station

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

U.S. ARMY MEDICAL DEPARTMENT

Name of Program:	Financial Assistance Program (FAP)
Number of years in existence:	Five
Source of funds:	Federal
Targeted at:	Medical Residents in selected specialties
Service stipulations:	First year = two-year active duty obligation; thereafter, 1:1
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	Be enrolled in an approved program at post-graduate level leading to board eligibility in a designated medical specialty; meet requirements for a U.S. Army Commission
Amount of repayment per year of service:	N/A
Number of recipients per year: Number of recipients over the life of the program:	20
Program's unique/special features:	Two-week annual training at training hospital
Supplemental materials on file at the AAMC:	Yes
Contact person(s): Agency name: Address:	NE AMEDD Regional Office 3 Wembley Square, S-103 New Karner Road Albany, NY 12205 (518)452-5872 SE AMEDD Regional Office Building 710, Fort Gillem Forest Park, GA 30050 (404)362-3138

Western AMEDD Regional Office
Box 327 FAMC
Aurora, CO 80045
(303)361-3208

Central AMEDD Regional Office
Rockland Plaza, S-21/G3
Lake Bluff, IL 60044
(708)295-9140

LOAN REPAYMENT/FORGIVENESS PROGRAMS FACT SHEET

U.S. Navy

Name of Program:	Navy Health Professions Scholarship Program
Number of years in existence:	
Source of funds:	Federal
Targeted at:	Medical, dental, and optometry students
Service stipulations:	Forty-five day active duty in Navy clerkship; then Navy residency; then three years of active duty obligation
Key eligibility requirements and/or restrictions: (not necessarily comprehensive)	US citizen; enrolled in/letter of acceptance from an accredited school of medicine, optometry, or osteopathy in the US/Puerto Rico or senior dental student
Amount of repayment per year of service:	N/A
Number of recipients per year:	N/A
Number of recipients over the life of the program:	N/A
Program's unique/special features:	Tuition and expenses, plus monthly stipend
Supplemental materials on file at the AAMC:	Yes
Contact person(s):	
Agency name:	U.S. Navy Opportunity Information Center
Address:	P.O. Box 9406 Gaithersburg, MD 20898-9979
Phone:	800-327-NAVY; in Puerto Rico: 800-327-6289



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